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Transcript Request-Cash, Checks, M.O.'s only

Payment required prior to processing

- \$5.00 fee for first request
- \$1.00 for each additional transcript
- \$30.00 Overnight UPS fee (\$5 fee + \$30 postage = \$35 for one overnight transcript)

Admissions Use Only

Initials _____

Date ____ Paid/Amt _____

Date Processed _____

Check, Cash, or M.O. ONLY
 -NOTE: All checks/M.O.'s are to be made payable to **Career Center of Southern Illinois (CCSI)**

PLEASE PRINT

SS# _____ BIRTHDATE _____

FULL NAME: Last _____ First _____ Middle _____

Birth/other names used when attending program: _____

COMPLETE MAILING ADDRESS Street _____ Apt #/or PO Box _____
 City _____ State _____ Zip _____ DAYTIME PHONE _____

Student Signature _____ Today's Date _____

**I authorize release of my transcript as directed.

**I understand that my transcript request *can be withheld due to financial obligations with Beck.*

PROGRAM

_____ Practical Nurse
 _____ Certified Nurse Assistant **Dates Attended Beck** _____

MAIL TO-Please Print

School/Business	School/Business
Mailing Address	Mailing Address
City, State, Zip	City, State, Zip

Number of copies _____

Please allow two to four business days to process, extra time may be necessary during peak periods (registration, end of semester, etc.)