TRANSCRIPT REQUEST

I would like to request that an official high school transcript be sent to Bluegrass Community & Technical College at the address below as part of the requirement for dual credit this semester through _____ Technology Center.

_____

Student Name (Printed)

_____ _____

Student/Parent Signature Date

Send roster to:

Rebecca Simms
Director of Dual Credit Initiatives & Opportunity College
Bluegrass Community & Technical College
164 Opportunity Way
Lexington, KY 40511-2623