

Date	Student ID or Birth Date
Full Name	
Current Mailing Address, City, State, Zip	
Phone Number	Email Address
Signature	
Presently Enrolled at IWCC – Yes () No () If not presently enrolled, date of last attendance:	
Send Now Send after grades are posted Circle one: Fall Winterim Spring Summer	
Send after grades are posted Circle one: Fall Winterim Spring Summer Send after Graduation Circle one: Fall Winterim Spring Summer	
Please send my transcript to: (Please print)	
(Please note that IWCC does not FAX or email transcripts.)	
College/Firm	College/Firm
Attention (office/person)	Attention (office/person)
Address	Address
City, State, Zip	City, State, Zip
Mail request to: lowa Western Community College Registrar's Office 2700 College Road, Council Bluffs, IA 51503	Or Fax request to: 712.325.3720

- Transcripts will not be released until all financial and other obligations with the college have been met and the student is in good standing.
- A minimum of five days should be allowed for processing transcript requests except at the end of semesters when more time is required.
- Students must present a photo ID to pick up a transcript at the Records & Registration Office.

If you are a current student, you may review your transcript request status in Reiver Online Campus (ROC) under Student Self Services.

Mission Statement

lowa Western Community College is a learning community committed to excellence in meeting the educational needs and improving the quality of life through programs, partnerships, and community involvement.