

## HARVEST BIBLE INSTITUTE

# TRANSCRIPT REQUEST

### APPLICANT

PLEASE PROVIDE THE FOLLOWING INFORMATION AND MAIL OR FAX THIS FORM TO ALL HIGH SCHOOLS AND COLLEGES YOU HAVE ATTENDED, REQUESTING THAT A COPY OF YOUR TRANSCRIPT BE SENT TO HARVEST BIBLE INSTITUTE. YOUR TRANSCRIPT MUST BE ON FILE WITH HARVEST BIBLE INSTITUTE BEFORE WE CAN PROCESS YOUR APPLICATION.

Full Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Student ID # \_\_\_\_\_ Last year of attendance \_\_\_\_\_

### ATTENTION REGISTRAR

I am applying for admission into Harvest Bible Institute, and I request that a copy of my transcript be sent to the following address:

**Harvest Bible Institute Admissions  
Post Office Box 2391  
Fayetteville, NC 28302**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

If there is any charge for this service, please bill me at the permanent address listed above.



Phone: (910) 433-3036 Fax: (910) 433-2364

Website: [www.harvestbibleinstitute.com](http://www.harvestbibleinstitute.com)