



OCONEE FALL LINE
TECHNICAL COLLEGE

HIGH SCHOOL/POST SECONDARY TRANSCRIPT REQUEST

Please complete and send to the high school and/or colleges you attended.

Please send an official transcript to (please check appropriate campus):

North Campus

Oconee Fall Line Technical College
Office of Admissions
1189 Deepstep Road
Sandersville, Georgia 31082

South Campus

Oconee Fall Line Technical College
Office of Admissions
560 Pinehill Road
Dublin, Georgia 31021

TO: Name of high school or postsecondary institution attended: _____

Address: _____

City: _____ State: _____ Zip Code: _____

FROM: Name: _____

Your name at the time you attended (if different from above): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____ / _____ / _____

Dates of Attendance: _____ to _____ Date of Graduation: _____ / _____ / _____

PLEASE FORWARD AN OFFICIAL COPY OF MY:

High School Transcript (Must have graduation date.)

College Transcript

Student's Signature: _____ Date: _____

Official Transcripts must be received in a sealed envelope with a seal and/or authorized signature. Faxed copies are not accepted.

OFTC is a unit of The Technical College System of Georgia and an Equal Opportunity Institution.