

Admissions & Records Office 3095 Yerba Buena Road San Jose Ca 95135

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## EMERGENCY TRANSCRIPT REQUEST (IN PERSON)

Last Name	First Name		Date of Birth	
Address			Telephone	
Student ID or Last 4 SSN				
Signature		Date		
	FOR OFF	ICE USE ONLY		
Received and processed by			Date	
Identification Required			Paid	