



Central Michigan University
and
Jackson College
Reverse Transfer Transcript Release Form

Return completed form to the Registrar's Office
Email: records@cmich.edu or Mail: Registrar's Office
Central Michigan University
212 Warriner Hall
Mount Pleasant, MI 48859
Phone: (989) 774-3261 choose option #2

PERSONAL INFORMATION

CMU ID # Jackson College ID #

Name Last First Middle

Previous Last Name (if applicable)

Birthdate (MM/DD/YYYY) Current e-mail address

Current mailing address:

Number and Street City State Zip Code

Daytime phone number ( )

Date last attended Jackson College

MAILING INFORMATION

Please forward a transcript to:
Transcript Coordinator
Jackson College
2111 Emmons Rd
Jackson, MI 49201

AUTHORIZATION TO RELEASE ACADEMIC RECORDS

FERPA COMPLIANCE - I authorize Central Michigan University to send my transcript to Jackson College for review under the Reverse Transfer Agreement. I also authorize Jackson College to:

- 1. evaluate to determine if I am eligible for an associate's degree
2. release the results of their graduation review to Central Michigan University of outstanding requirements
3. send a transcript to Central Michigan University if a degree is awarded

Student Signature Date

Federal law requires the student signature for release of transcripts. All holds must be cleared before submitting a transcript request.