

Champion Christian College
600 Garland Ave
Hot Springs, Arkansas 71913



Phone: 501-623-2272
Fax: 501-623-4262
www.championchristian.com

CHAMPION

CHRISTIAN COLLEGE

Transcript Request Form

Please print and fill out all information accurately and completely.

Applicant

Please complete the following information and submit this form to your high school or college to be sent with your transcripts following graduation.

Name of Applicant: _____ Date of Graduation: _____
Social Security Number: _____ Birth Date: _____
Home Address: _____ Phone Number: (____) _____
City: _____ State: _____ Zip: _____
Complete Name of High School/College: _____
School Address: _____
City: _____ State: _____ Zip: _____
Applicant's Signature: _____ Date: _____

High School/College

Please send this form along with a copy of the applicant's academic records following graduation to:

Champion Christian College
Attention Admissions Office
600 Garland Ave
Hot Springs, Arkansas 71913