



Mississippi College

A CHRISTIAN UNIVERSITY

Application for CEU Transcripts and Reissued Certificates

Name: _____

Social Security Number (Last four digits): _____

Teacher License Number: _____

Address: _____

Daytime phone: _____ Evening Phone: _____

Form Requested (please check the box that applies)

- Transcript (all CEUs earned after June 1, 2000)
- Copy of Certificate:

Class name: _____

Class date: _____

Provider: _____

Your request cannot be processed without payment.
Payment of \$15.00 required for each transcript or certificate requested.

Online payments: www.mc.edu/ceutranscript

For postal mail return form with check or money order to:

CEUs
Office of Continuing Education
Box 4031
Clinton, MS 39058