

INSTRUCTIONS for completing the Transcript Request Form

Introduction

The Official USCG Registered transcript is based on the Military Education Assessment. Before an official transcript is issued information on the assessment is verified for accuracy. The information in the PMIS should mirror the information on the transcript. Members are advised to review their PMIS record and take the necessary action to keep it up-to-date. **Members must request an educational assessment while on active duty or as a reservist.**

The transcripts issued by the CGI reflects the credits recommended by the American Council on Education in either the ACE Guide or the National Guide as well as traditional college credits. The college credits listed on the CGI transcript will not be accepted in transfer by other colleges and universities. The college originating the credits must send an official transcript directly to the accepting institution.

Requesting a Transcript

Steps for requesting an official transcript.

1. Complete the CGI Form 1560/04e, "Educational Assessment Worksheet." Once the assessment has been completed, the record is maintained for the member's lifetime and a transcript may be requested at anytime.
2. The individual must request the official transcript. Due to the Privacy Act, information on the individual cannot be released to a third party without the individual's written consent. Electronic signatures are not sufficient.

**DEPARTMENT OF
TRANSPORTATION
U.S. COAST GUARD
INSTITUTE (5/99)
CGI 1560/09**

USCG TRANSCRIPT REQUEST FORM

First Name

Middle Initial

Last Name

Street Address

City

State

Zip

Social Security Number: _____ Phone Number: _____

Please send my official USCG Transcript documenting my military learning experiences to the address below. I understand that a copy of the transcript will be provided to me at the above address. If I have not had an assessment done by the CGI, I am attaching CGI Form 1560/04e.

If there are any questions, please contact me at the phone number above



Member's Signature

=====
Mail official transcript to:

University/College Name

Street Address

Street Address

City, State, Zip

Attn: _____
=====

Mail this form to:

USCG Institute (VE)
5900 SW 64th ST RM 235
Oklahoma City, OK 73169-6990



Submit request