

**ILLINOIS VALLEY COMMUNITY COLLEGE
CO-CURRICULAR TRANSCRIPT PROGRAM
APPLICATION FORM**

Student ID _____ **Date Of Application** _____

Student's Name _____

Address _____

City _____ **Zip** _____ **Phone ()** _____

Dates Of Attendance At IVCC _____

Are You Currently In Good Standing At IVCC? Yes No

I confirm that all of the information contained on this application is correct:

Student's Signature

Date