

## Official Degree Audit Request

Date \_\_\_\_\_

Name \_\_\_\_\_

Student ID Number \_\_\_\_\_

Major/Program \_\_\_\_\_

\_\_\_\_\_ I recently changed my program of study and I have transfer credit from another college. Please re-evaluate my transcripts.

\_\_\_\_\_ I am considering changing my major/program. Please complete a degree audit for the following major/program

\_\_\_\_\_.

***Your official degree audit will be emailed to your IWCC email account or mailed to you. Please select only one of the following options:***

\_\_\_\_\_ IWCC Email Address

\_\_\_\_\_ Mailing Address \_\_\_\_\_

Mail request to:  
Iowa Western Community College  
2700 College Road  
Council Bluffs, IA 51503

Or Fax request to:  
712.325.3720

**\*Please allow 3 weeks for the completion of this audit.**