

**\*\*\* Official Transcript Request Form \*\*\***

**Student Information**

Student's full name: \_\_\_\_\_  
Your name as it is recorded in our student records.

Student ID: \_\_\_\_\_  
NOTE: This is your University-assigned student ID (example: A#####).

First semester of attendance (circle/indicate year):  
Spring      Summer I      Summer II      Fall      Year: \_\_\_\_\_

Last completed semester of attendance (circle/indicate year):  
Spring      Summer I      Summer II      Fall      Year: \_\_\_\_\_

**Transcript Processing Information**

- Process immediately
- Do not process until grades or degree have been recorded for \_\_\_\_\_ semester.  
Example: Fall 2008

Please indicate the number of official transcripts needed (limit of two per request):

\_\_\_\_\_ Undergraduate      \_\_\_\_\_ Graduate      \_\_\_\_\_ Doctorate

Check one:

- I will pick up transcript(s)
- Mail transcript(s) to address below

Mail to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Current Contact Information**

Your name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Student signature: \_\_\_\_\_

Date \_\_\_\_\_

Please attach a copy of your photo ID to this form upon submission.