Transcript Request Form

Status/Fee (Check One):

_____ Current degree student ($5.00)

_____ Withdrawn degree student ($5.00)

_____ Special non-degree student ($5.00)

_____ Alumnus ($5.00)

_____ Current degree student, Internal Use Only-AEA, Co-op, etc. (no fee).
*NOTE: You may have any, all or none of your narrative evaluations mailed with your transcript. There is no additional fee for the evaluations.

OVERNIGHT DELIVERY FEE (Check if desired): Additional $20.00 fee _____

TOTAL FEES: _____

YOUR NAME: _____

YOUR ADDRESS: _____ (Your receipt will be sent to this address.)
_____
_____

YOUR S.S.# :_____ DATES ATTENDED: _____

SEND TRANSCRIPT TO: No. of copies _____ Date needed: _____
(Providing a specific name or office will assist in prompt delivery. Please list additional addresses on the back of this form if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

DO YOU WANT THE EVALUATIONS MAILED WITH YOUR TRANSCRIPT ?

CIRCLE ONE: YES NO ALL SELECTED

*If you want only selected evaluations sent, list them on the back of this form.

YOUR SIGNATURE: _____ DATE: _____

CURRENT STUDENTS:

List last study quarter/term for which you want the credits to appear on the transcript. _____.

Do you want the evaluations for that quarter to be sent? (Circle one) YES NO

Please take this form to the Student Accounts Office for clearance of your financial aid status. Transcripts cannot be released without this clearance. Exempt for Internal Use.

STUDENT ACCOUNTS OFFICE CLEARANCE: Yes_____ No_____

By_____ Date_____