

## TRANSCRIPT REQUEST FORM

Requestor's Name and Address (used for transcript mailing confirmation):

PRINT CLEARLY WITHIN ADDRESS BLOCK

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

OFFICE USE ONLY  
Due: \$ \_\_\_\_\_ Paid: \$ \_\_\_\_\_  
Date Mailed \_\_\_\_\_

Date \_\_\_\_\_

Check here if you were enrolled during or after Fall 2006.

Dates of Attendance \_\_\_\_\_

Name used during attendance: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Submit a separate form for each "mail to" address. Allow 2-3 working days' processing time. Additional time is required for end-of-semester requests. All financial obligations to the university must be satisfied before the transcript is released. Transcripts show all work completed at Susquehanna University. Transcripts from other institutions cannot be duplicated.

*A \$3 charge is applied for each transcript.*

### Action Requested:

Number of Official Transcripts to the address below: \_\_\_\_\_ Number of Unofficial Transcripts to the address below: \_\_\_\_\_

- Send as soon as possible
- Hold for end-of-term grades
- Hold for degree posting
- Hold for off-campus credits from \_\_\_\_\_  
Institution

Mail/Fax\* to (include company/institution name):

PRINT CLEARLY WITHIN ADDRESS BLOCK

\_\_\_\_\_

\* Please be advised that we cannot fax or email official transcripts. Unofficial copies can be faxed to the number you provide.

I hereby authorize the release of my transcript to the address shown.

Signature \_\_\_\_\_ Student I.D. Number (if known): \_\_\_\_\_

*OFFICIAL TRANSCRIPTS are printed on security paper and bear the raised seal of the university. This transcript is released to you at the personal request of the person named above. It may not be used for any other reason than that for which it was originally provided and it may not be released to anyone outside your own institution or business without written authorization of this individual.*