

# Transcript Request Form

Complete a separate request form for each address. Transcripts will not be sent for a student with outstanding debts. Transcripts from other colleges cannot be duplicated; contact those colleges directly. Requests will be honored as quickly as possible; during peak periods of registration there may be some delay. *Please use blue or black ink.*

Last Name, First Name \_\_\_\_\_

Previous Name \_\_\_\_\_

Street Address \_\_\_\_\_

SSN/CID \_\_\_\_\_

City, State, Zip code \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone # \_\_\_\_\_

**Please check all that apply:**

**Status:**

- Currently Matriculated
- Continuing Education
- Withdrawn
- Graduated from Purchase \_\_\_\_\_ (mo./year)

**Transcript Type:**

- Official to Institution
- Official sealed to student
- Unofficial Transcript

**Attendance:**

- Attended Purchase prior to Spring 1992
- Attended Purchase Spring 1992 & after

**Handling Instructions:**

- Send \_\_\_\_\_ copies to address indicated
- Send now
  - Wait for this semesters grade(s)
  - Wait for degree to be posted
- I have a deadline of: \_\_\_\_\_

Mail to: _____ _____ _____ _____
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<b>For Office Use Only</b>	
Rec'd _____	By _____
Flag _____	Date Sent _____

Signature: \_\_\_\_\_(required)