Transcript Request
Revised 06/2023

FSUID or EmplID

Dates of attendance (approximate years in YYYY format)

Last Name

First Name

Middle Name

Date of Birth

Other last name(s)

Current Address

City

State

Zip

Telephone Number

Email Address

Transcript should be:

☐ Mailed

☐ Sent electronically (if available*)

☐ Emailed by PDF (if available*)

☐ Picked up in person

☐ Sent now

☐ Held for grades

☐ Held for degree

Number of copies to be sent to this address

☐

A $10.00 fee is required for each copy.

Transcript should be sent to the following address:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

By signing this request form, you agree to pay the $10.00 charge in full for each transcript prior to service being completed.

Student’s Signature

Date

* Electronic transmission of transcripts is only available to select colleges and universities.