OFFICE OF THE REGISTRAR
VILAS 117
Phone: 315 229-5267
Fax: 315 229-7424

TRANSCRIPT REQUEST FORM
ALL transcripts are processed in the order received - Processing time is 3-5 business days after receipt

STUDENT Name and Address: (Please Print Clearly)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

☐ Check to update Permanent Address in our database.
☐ Check to update Phone number(s)/Email in our database.

Undergraduate Coursework Only
Graduate Coursework Only
Combined Grad/Undergrad Work

☐ Official    ☐ Unofficial

☐ Send NOW
☐ Hold for GRADES
☐ Hold for DEGREE

☐ Number of Transcripts

SLU ID#: _________________ Date of Birth: _________________ *HOME Phone: (_____ ) _____ - _________

*Email Address: ____________________________________________ *CELL Phone: (_____ ) _____ - _________
*(these may be used to contact you regarding the status of your transcript)

Class Year: __________ Years of Attendance: ____________ - ____________

Maiden/Former Name(s): _______________________________________________________________________

Purpose of Transcript Request: __________________________________________________________________

Student’s Legal (hand-written) Signature (Required): _____________________________________________

Date: ________________________

FEDEX (optional): To deliver via Fed Ex, please provide your Fed Ex account number (NOT credit card number).
• Fed Ex delivery speeds delivery time, not processing time. All requests are processed in the order received.
• Call (800) GOFEX or logon to www.fedex.com to create an account.
• Fed Ex Transcript Requests MUST have a valid daytime phone number included.
• Fed Ex will not deliver to a post office box.
• Transcripts shipped STANDARD OVERNIGHT, unless otherwise specified.

Fed Ex Account #: __________________________________ Addressee Daytime Telephone: (_____ ) _____ - _________

THERE IS NO CHARGE for transcripts.
You can mail this request to the address above or fax it to 315-229-7424. Depending on the Academic Calendar, normal processing time is three to five business days after receipt. Requests for five or more transcripts may take longer.

NOTE: THIS PORTION WILL BE DETACHED FOR MAILING YOUR TRANSCRIPT(S)
• Please write legibly.
• FULLY complete one form for EACH recipient.
• Transcripts will NOT be emailed.

Mail To:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

☐ PICK UP in office
☐ MAIL to SMC #__________
☐ Special Instructions:

________________________________________________________________________

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