

_____ Last Name First Middle

**SLIPPERY ROCK UNIVERSITY
OFFICE OF ACADEMIC RECORDS & REGISTRATION
104 MALTBY AVENUE, SUITE 107
SLIPPERY ROCK, PA 16057
PHONE: (724) 738-2010 FAX: (724) 738-2936
academic.records@sru.edu**

TRANSCRIPT REQUEST

One form may be used for multiple transcript requests providing all transcripts are to be processed in the same manner and sent to the same address/fax number/e-mail address. Otherwise, please complete a separate form for each transcript requested.

Limit of 5 transcripts per day.

Instructions: Please complete this form and allow 48-72 hours after receipt for regularly processed transcripts (no cost). For **same day requests, cash, checks and credit cards are acceptable.** If you wish to pay by money order or check, please make payable to "Slippery Rock University." **To pay by credit card,** please refer to the payment link under the same day \$10 fee heading on the transcript request information page on the website. This completed form and your PAID receipt, check, or money order should be returned to Academic Records & Registration.

Note: Requests will **not** be honored for a person who has a financial or other form of obligation to the University.

Students who have attended SRU from Fall 2011 on, please supply your Rock I.D. No. in the block at the top of this form.

Mr./Mrs./Ms. _____
Last First Middle Initial(required) Maiden or Former Name

* _____
Address City State Zip Code
()

E-Mail Address Day/Cell Phone No. Soc. Security No. Birth Date

Number of transcripts being requested _____

Please send transcript(s)--check one box only:

- After Fall Semester grades are posted
- After Spring Semester grades are posted
- After Pre-Session grades are posted
- After Summer Session I grades are posted
- After Summer Session II grades are posted
- After Winter Semester grades are posted
- After degree is confirmed
- Immediately

I would like my transcript(s) processed:

- REGULAR PROCESSING 48- 72 hrs – NO CHARGE**
- Pick up (please note date below) – No Charge
- Mailed within 48-72 hrs – No Charge
- Faxed within 48-72 hrs – No Charge**
(Faxed transcripts will not be mailed)
- Email -sent electronically within 48-72 hrs – No Charge***
(with the electronic option, no paper copy is produced)
- SAME DAY PROCESSING - \$10.00 PER TRANSCRIPT**
- Same day mail/pick-up - \$10.00 per transcript
- Same day fax ** \$10.00 per transcript
- Email-sent electronically *** \$10.00 per transcript

Each transcript will be placed in a signed/sealed envelope. The transcript will be rendered "unofficial" if opened by someone other than the intended recipient.

I will pick up my transcript on _____ **(insert date). A photo ID is required to pick up transcripts. If someone else will be picking up your transcript(s), please provide that individual's complete name.**

Please mail/fax/e-mail transcript(s) to: _____
(please check one box only) me at the address noted at the top of the form*
 the following individual/institution/office and address

****If faxing, fax no.** () _____ ***** If sending electronically, email address of recipient** _____

X _____ **REQUIRED** _____
Current/former student's signature _____ **Date** 06-08-18
No electronic or digital signatures will be accepted