

**UNIVERSITY OF DALLAS REGISTRAR'S OFFICE
OFFICIAL TRANSCRIPT REQUEST FORM**

**FAX REQUEST TO (972) 721-5132 REGISTRAR'S OFFICE
FAX REQUEST TO (972) 721-5254 OFFICE OF STUDENT RECORDS**

There will be a \$2.00 charge per copy. If all accounts are clear, the transcripts will be mailed in 2-3 working days. (Longer at beginning and end of semester or holidays.) If picking up transcripts, please call first to see if transcripts are ready. Same day transcripts are available on an emergency basis at an additional charge of \$3.00 each (\$5.00 total), if staff is available to process. A SEPARATE FORM IS REQUIRED FOR EACH ADDRESS TO WHICH TRANSCRIPTS ARE BEING SENT. Students may receive up to 5 transcripts free of charge the term after they have graduated (unless the transcript is requested on a same day, emergency basis).

Last Name **First Name** **Middle Initial**

Former/Maiden Name:
UD ID # or Social Security Number:
Student Signature & Date:

Send transcript to: (or check box if student will pick up [])
 Number of copies to this address: _____

CHECK THE APPROPRIATE BOXES:

Program:

Undergraduate

Braniff/IRPS

GSM

Currently enrolled--if not, list dates of attendance: _____

Student's Current Mailing Address (if different than above)

Transcript is for:

Graduate School Admission

Transfer college/university

Summer admission

Job interview

Other

Daytime Phone: _____

FAX Number: _____

Special Instructions: _____

DO NOT HOLD FOR SEMESTER GRADES

SEND END OF TERM:

Fall _____

Spring _____

Summer _____

(Request will be held for final grades for the term checked)

HOLD UNTIL GRADE CHANGE POSTED

Course: _____

Grade: FROM: _____ TO: _____

OFFICE USE ONLY:

HOLD UNTIL DEGREE IS RECORDED

GRADUATION TERM:

Place transcripts in separate sealed envelopes

AMOUNT RECEIVED: _____

AMOUNT DUE: _____

DATE COMPLETED: _____