Request for Student Copy of Transcript

Please send me a student (unofficial) copy of my transcript. I understand that my final transcript will not be released without:

- 1. Documented completion of all coursework and clinical hours
- 2. Return of all Library or School materials
- 3. Signed and dated Official Transcript Request form
- 4. Fulfillment of all financial obligations with the school

| Student's Signature | | Date | | |
|-------------------------|-----------|-----------------------|----------|--|
| Print Name | Student # | ¥ | | |
| Current Address: Street | City | State | Zip Code | |
| E-mail Address | Phone | Cell Phone | | |
| Hold for pick-up | Send to | Send to above address | | |

Students are allowed the first three transcripts free of charge. Additional student transcript copies cost \$5 each, due at time of request.

Amount Enclosed: _____

| OFFICE USE: | |
|---|--|
| Student has fulfilled all financial obligations with the school | |
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Initials