

OFFICIAL TRANSCRIPT REQUEST

Fill-out form (PLEASE PRINT), sign, and mail with \$5.00 per transcript to:

University of Wisconsin-Platteville
Office of the Registrar
101 Brigham Hall
1 University Plaza
Platteville WI 53818-3099
PHONE: 608-342-1321 FAX: 608-342-1389

For Office Use Only	
RECEIVED	Emplid: _____
	PS _____ COMPASS _____ Vault _____
	Paid: \$ _____ Mthd Payment: _____
	Inv #: _____ Date Sent: _____

Last Name First Name Initial SS# or ID# _____

List former name(s): _____ Date of Birth: ____/____/____

CURRENT: _____
ADDRESS: _____

PHONE: _____ CELL: _____

***** PLEASE NOTE *****

Transcripts issued to the student will be stamped **ISSUED TO STUDENT**.

- * Most organizations will **NOT** accept an "ISSUED TO STUDENT" transcript.
- * To avoid delays and additional costs, determine what is required before completing your request.

ARE YOU CURRENTLY ENROLLED? YES___ NO___ (If NO, date of last attendance: _____)

Undergraduate* and **Graduate School**** records are separate. Requesting both transcripts would be considered two transcripts at \$5.00 each. Official transcripts are printed on security paper and bear the signature of the Registrar and the school seal.

Number of *Undergraduate transcripts _____ @ \$5.00 each

Number of **Graduate School transcripts _____ @ \$5.00 each

- Check one {
- Prepare transcript(s) **NOW**
 - HOLD** for grades in progress
 - HOLD** until degree is posted

Make checks payable to UW-Platteville. Black or blue ink pen only. All other checks will be returned to the student.

CREDIT CARD – MasterCard or VISA only!

Account #: _____ & **Expiration Date:** _____

CHECK ONE OF THE FOLLOWING:

- I will **PICK UP** transcript(s) in person. (Must show I.D.)
- MAIL** transcript(s) to address(es) listed - (PLEASE PRINT - **You are responsible** for correct, complete & legible address.)

✦ If transcripts are being sent to you, should they be in separately sealed & stamped envelopes? Yes No

***Please list additional addresses on the back or include them on a separate sheet. Thank you!**

SEND TO: _____

STUDENT SIGNATURE: _____
(Family Rights and Privacy Act of 1974 requires Student Signature.)

***** NOTE *****

NO transcripts will be issued if there are any outstanding debts at UW-Platteville.

Insufficient, inaccurate or illegible information, transcript will not be processed!

