

Transcript Request Form

Name:	Student G#:
	Date of Birth:
Address:	Former Name (if applicable):
Telephone #:	Currently enrolled? Yes If NO, year of last enrollment:
Number of Copies (up to 10):	Send Transcript As Is
Send Transcript(s) to (do not fill out if picking up):	Hold for posting of current semester grades
Recipient Name:	semester grades
Address:	Hold for graduation verification Other:
City, State ZIP:	For Office Use Only:
Pick Up Location (only if you are not mailing it):	Date Requested Initials
Allendale (150 STU) Grand Rapids (115C DEV)	Date Sent Initials
Student Signature:	Date:
We do not accept font written (typed) or electronic signatures. Please hand sign the form.	
Completed forms may be returned to the Student Assistance Center in Allendale (150 Student Services) or the Grand Rapids Pew Campus (115C DeVos) in person, by fax to (616) 331-2000, by email to transcripts@gvsu.edu, or by mail to the Registrar's Office, 150 Student Services, Allendale, MI 49401.	