



**UNOFFICIAL - TRANSCRIPT REQUEST FORM**

(Note: Requests are processed on a first come, first served basis.)

Name: \_\_\_\_\_ Name during attendance: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ SS# or Student ID#: \_\_\_\_\_

Year of Graduation or Dates of Attendance: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ (required)

Choose one:

- Send now
- Wait until current grades are posted

Choose one Delivery Method:

- I will pick up the transcript
- Send to:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

Fax to:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Fax Number

Email as pdf to:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email address

Choose one Reason for Transcript:

- Transfer
- Admission
- Employment
- Graduate School
- Law School
- Medical School
- Self
- Registrar
- Scholarship/Grant/Fellowship
- State Exam Board
- Self-Managed Package
- Grade Verification
- Certification/Licensure
- Undergrad Admission
- Verify Degree Complete
- Other

**ONLY COMPLETE THIS SECTION IF YOU WANT YOUR TRANSCRIPT SENT OVERNIGHT!**

Do you want your transcript sent via overnight service?  Yes  No (If no, do not enter card info.)

**We mail for FREE via US Postal Service to US and international locations.** If you want overnight mail, you must include a current MasterCard or VISA # along with the expiration date below. Fees for overnight service are assessed by the overnight courier. NOTE: Overnight deliveries cannot be made to a PO Box; a street address must be provided.

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Send this completed form to:  
Office of the Registrar  
Dickinson College  
P.O. Box 1773  
Carlisle, PA 17013  
or fax to: 717-245-1534

or you may email it as an attachment to: transcript@dickinson.edu