



# TRANSCRIPT REQUEST

Records Office  
University of Missouri-St. Louis  
One University Boulevard  
St. Louis, MO 63121

Phone: (314) 516-5676 Fax: (314) 516-7096

For Cashier's Use

Current Name \_\_\_\_\_ UMSL Student Number \_\_\_\_\_  
 Name While Attending \_\_\_\_\_  
 Social Security # \_\_\_\_\_ Birth Date \_\_\_\_\_  
 (required only if student number is unknown)  
 Home Telephone # \_\_\_\_\_  
 Present Address \_\_\_\_\_ Business Telephone # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 Student Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

Are you a registered student for the CURRENT semester?  YES  NO  
 If no, what is the last year that you enrolled at UM-St. Louis: \_\_\_\_\_

**TRANSCRIPT INSTRUCTION: Any transcript given or mailed to the student will be stamped "Issued To Student" and may be considered unofficial by the receiving party.**

1.  Take with me. (It is not necessary for you to complete the mailing label below)
2.  Send by: Mail \_\_\_\_\_ Fax \_\_\_\_\_ E-delivery \_\_\_\_\_
3.  Send immediately.
4.  Hold request for **current semester** grades.  Fall  Spring  Summer
5.  Hold request for posting of **degree or certificate**.
6.  Hold for notation: **"Missouri General Education Requirements Met"**.
7.  Hold for (specify): \_\_\_\_\_

Please send \_\_\_\_\_ copy(s) to the recipient below. Choose Delivery Method  Mail  Fax  Email  ETX

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
 ETX: \_\_\_\_\_  
 (SCHOOL NAME)

Please send \_\_\_\_\_ copy(s) to the recipient below. Choose Delivery Method  Mail  Fax  Email  ETX

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
 ETX: \_\_\_\_\_  
 (SCHOOL NAME)

**Transcript Fee: Paper Transcripts \$10 per copy \*\* Electronic Transcripts \$5 per copy**

Form of payment (check one)  Cash  Check  Credit Card

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

