GPA Equivalent Letter Request

ANTIOCH UNIVERSITY
SANTA BARBARA
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Today's Date: _____   <u>Program Attended:</u> ☐ BA ☐ MACP ☐ MBA ☐ PSYD ☐ MAOM/DBA ☐ SP

_____
Last Name   First Name   MI   Social Security # or ID#

_____
Address   Apt. #

_____
City   State   Zip

_____
Email Address   Phone

_____
Name under which I attended *(if different from above)*

Recipient 1 (address, email, or fax):

_____

_____

_____

Number of letters to Recipient 1*: _____

Please calculate GPA Equivalent:
☐ Now
☐ When current quarter assessments are completed
☐ When degree has been posted

Recipient 2 (address, email, or fax):

_____

_____

_____

Number of letters to Recipient 2*: _____

Delivery method:
☐ Pick up
☐ Send to recipient(s) listed
☐ Mail with transcripts (requires separate transcript request)

Please allow 10 days for processing

Signature*: _____

Please note that an electronic signature is only valid when using an Antioch email account.