



Graduate School

P.O. Box 340  
Milwaukee, WI 53201-0340

For Office Use Only		
Hold: _____	ID: _____	By: _____
Date Processed: _____		By: _____

## UNOFFICIAL GRADUATE TRANSCRIPT REQUEST FORM

### MAILING ADDRESS (PLEASE PRINT LEGIBLY)

FIRST NAME	LASTNAME
ADDRESS	
CITY/STATE/ZIP	

### STUDENT INFORMATION

Name
Address
Address 2
City/State/Zip

If registered under a former name, please indicate below:

Student ID or Social Security #:

Area Code + Daytime Phone Number:

E-mail Address:

### TRANSCRIPT REQUEST INFORMATION

Dates of attendance as graduate student at UWM:

### MAILING INFORMATION

- Do not mail. I will pick up the transcript.
- Mail transcript now.
- Mail transcript after grades are posted.
  - Fall  Spring  Summer  Winter
- Mail transcript after degree is posted.
  - Fall  Spring  Summer  Winter

### STUDENT SIGNATURE

<b>X</b> _____ (Required by the Family Educational Rights and Privacy Act of 1974 (FERPA))
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- Official transcripts are now ordered online. Visit: <http://uwm.edu/graduateschool/request-transcripts/>.
- Due to FERPA regulations, the Graduate School cannot send unofficial transcripts electronically.
- Transcript requests must come from the student/former student. Requests from a third party will be processed only with written permission from the student/former student.
- To request unofficial transcript by mail, complete and print this form and send it to the address above.
- Transcripts will be withheld if any obligations to the University have not been satisfied.