

Unofficial Graduate Transcript Request Form

This form must be submitted with a legible copy of a valid legal government issued photo ID
(examples: driver's license, state ID, Tribal/Native American ID, or passport)

Student Information

First Name: _____ Middle Initial: _____ Last Name: _____

Student ID Number*: _____

*If you are unsure of your campus ID number, please contact our IT Help Desk at (414) 229-4040. Please note: if you attended UWM prior to 1984, your campus ID number is the same as your SSN.

Email address: _____ Phone Number: _____

Former or Maiden Name: _____

Birth Date (YYYY-MM-DD): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Transcript Information

Send Transcripts (check one):

Now

Hold until grades are available for _____ semester (grades reported as incomplete will be sent out)

Hold until _____ degree/certification is granted for this term: _____
Type of _____ Month/Year

Please provide a complete mailing address or your transcript request will be delayed. (one address per form). Mail to:

Name _____

Address: _____

City: _____ State: _____ Zip Code: _____

1. We do not accept electronic or typed "signatures" as authorization. Please hand sign the form, otherwise it will not be accepted.
2. Please attach a scanned copy of your photo ID to this form when submitting your request. If you do not submit this with your form, we will not be able to send it out on your behalf.
3. We are unable to send an electronic version of your unofficial transcript. Please visit our website to obtain an official PDF copy if you'd prefer this version instead: uwm.edu/graduateschool/request-transcripts/
4. The unofficial transcript is complimentary. Please do not send us a check or cash with your request.
5. Transcripts will be withheld if any obligations to the University have not been satisfied.

You may email this form to: gradschool-staff@uwm.edu or mail it to: **Graduate School Unofficial Transcripts**

Mitchell Hall RM 261
P.O. Box 340
Milwaukee, WI 53201-0340

Signature: _____ Date: _____