



UNOFFICIAL TRANSCRIPT REQUEST

REGISTRAR'S OFFICE

I (print name) _____ give permission to the Registrar's Office to release an unofficial copy of my transcript.

DATES OF ATTENDANCE: **PRIOR TO 1988** **AFTER 1988**
(CHECK BOTH IF APPLICABLE)

ID is required to pickup transcript.

_____ Number of Copies

Check the appropriate box

Pick up

Unofficial transcript to be mailed to:

(Print your name and mailing address)

The unofficial transcript will be available for pick-up in Whitecar Hall, Suite 1100, after 12 PM on the next school day. Please note that transcripts will not be released for students with outstanding obligations to USciences as indicated in the Student Handbook.

(Signature of Student) (ID #) (Date)