

## TRANSCRIPT REQUEST FORM

Official transcripts are required for each college or university that you have ever attended. This form is provided to assist you in requesting your transcripts. Feel free to duplicate it if you need additional copies. Please complete this form and submit it to the appropriate department at your previous school. Additional forms and/or a fee may be required by your school.

**TO: Registrar/Student Records Officer/Controller of Examinations**

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Name of college/university

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Address

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City

State

Zip Code

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Country (if outside of the U.S.)

**FROM:**

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Name of student

Other name used while in attendance

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Address

Student ID#

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City

State

Zip Code

Dates of attendance

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Telephone#

Date of graduation

Please be informed that I have applied for admission to the College of Staten Island of the City University of New York (CUNY) as a graduate student. In order to complete my application, I am required to submit an official transcript from your institution. Please forward my transcripts to the address listed above – attention graduate admissions.

Thank you for your assistance

Sincerely,

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Signature

Date