



Office of the Registrar

900 N. Benton Avenue
Springfield MO 65802
Phone (417) 873-7211

STAFF USE ONLY
Staff \_\_\_\_\_
Amount \_\_\_\_\_
Check/M.O.# \_\_\_\_\_

TRANSCRIPT REQUEST

Please print clearly and fill in all portions of the form.
Using the contact information at the right, submit the
completed form to the Registrar's Office in person or by mail.

1. Student Information

Drury ID \_\_\_\_\_ SSN \_\_\_\_\_ BIRTHDATE (MM/DD/YY) \_\_\_\_\_
Name: LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ OTHER NAME(S) WHILE ATTENDING \_\_\_\_\_
Currently enrolled? [ ] YES [ ] NO \_\_\_\_\_
LAST DATE ATTENDED (YEAR) \_\_\_\_\_
CURRENT PERMANENT ADDRESS, APT. # \_\_\_\_\_
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY (only in MO) \_\_\_\_\_
DAYTIME PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

2. Transcript Processing

Choose One: [ ] WILL PICK UP [ ] MAIL
[ ] Send Now
[ ] Hold for degree posting
[ ] Hold for current term grades
Quantity of Transcripts:
[ ] UNDERGRADUATE [ ] GRADUATE
Mail To Recipient:
NAME \_\_\_\_\_
ADDRESS LINE 1 \_\_\_\_\_
ADDRESS LINE 2 \_\_\_\_\_
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

3. Transcript Policy

- Student records are confidential. Your signature is required to authorize the release of your transcript.
• Transcripts are normally processed within 1 to 2 business days.
• Transcripts will not be released if you have a past due balance with Drury University.
• A fee of \$12 per transcript is due at the time of request. Checks should be made payable to Drury University.

SIGNATURE \_\_\_\_\_ DATE (MM/DD/YY) \_\_\_\_\_