

TRANSCRIPT REQUEST FORM

Phone: 610-799-1774

PLEASE PRINT LEGIBLY TO AVOID DELAY IN PROCESSING

SOCIAL SECURITY NUMBER	D.O.B.	STUDENT ID NUMBER	IMPORTANT! A transcript will not be issued until all outstanding obligations due to the
NAME (Last, First, Middle)		MAIDEN/OTHER NAME	college are cleared. INSTRUCTIONS:
CURRENT ADDRESS			TO ORDER TRANSCRIPTS (NO FEE) 1. MAIL: Completed form to Enrollment Services
CITY, STATE, ZIP CODE			4525 Education Park Drive Schnecksville, PA 18078-2598 2. ENROLLMENT SERVICES FAX:
TELEPHONE NUMBER		DATE OF REQUEST	610-799-1173 3. IN PERSON: Complete form,
STUDENT'S SIGNATURE			submit to Enrollment Services with Photo ID.
			Please allow up to seven (7) business days for processing.
In accordance with federal law, records cannot be released without the written consent of the student. Be sure to sign this form! Your signature is required.			
PLEASE MAIL TRANSCRIPTS TO THE ADDRESS(ES) LISTED BELOW:			
# of copies requested		# of copies requested	
Name/Institution		Name/Institution	
Address		Address	
City, State, Zip		City, State, Zip	
# of copies requested		# of copies requested	
Name/Institution		Name/Institution	
Address		Address	
City, State, Zip		City, State, Zip	
SPECIAL INSTRUCTIONS FOR TH	IIS REQUEST:		
☐ Send Transcript Immediately		Official Transcripts will not list In-Progress Courses.	
☐ Hold Transcript for Final Grades			
☐ Fall ☐ Spring	☐ Summer ☐ 1st 5-week optio	n 2nd 5-week option	☐ 10-week option
☐ Hold Transcript for Degree			
PERM33-g (10/15/10)			