

Transcript Request Form for Concordia University Ann Arbor in partnership with Concordia University Wisconsin

Please print, complete, sign, and fax or mail to:

Registrar's Office

Concordia University Ann Arbor

4090 Geddes Road

Ann Arbor, MI 48105

FAX: 734.995.7448

Phone: 734.995.7413

e-mail: registrar@cuaa.edu

Please provide the following information about yourself:

Name: _____

Maiden or student name: _____

Address: _____

Home phone: _____ e-mail address: _____

(required) F00 #: _____ or Social Security #: _____

Signature _____

Student signature is required for release of transcripts.

Requesting:

___ Official transcript(s) (Please indicate the number of transcript requesting)

Billing (please check preference; \$7 each per official transcript)

___ Payment enclosed – Make checks payable to **Concordia University Wisconsin**

___ Please bill my credit card.

If paying by credit card:

Credit card type: ___ MasterCard ___ Visa ___ Discover

Credit card number: _____

Credit card expiration date: _____

Zip Code for Billing: _____

___ Unofficial transcript (one unofficial transcript allowed per request-no fee required)

(If we are faxing the unofficial transcript, please indicate fax # below)

Please fax unofficial transcript to (_____)_____

Attention: _____

Concordia should send the transcript to:

Name _____

Address _____

Additional Information:

___ Currently enrolled

OR

Dates of Attendance _____

Other remarks _____

Check those statements that apply:

___ Mail immediately

___ Hold for current term grades

___ Hold for graduation posting

___ Will pick up transcript

**Official and unofficial transcripts
can be mailed or picked up. Only
unofficial transcripts can be faxed.**