



Transcript Request Form

Revised: 09/30/2011

Please print this document to request an official transcript. This form must be completed in full. You may mail this request to 1200 Sycamore, Waxahachie, TX 75165, attention Registrar's Office or fax this request to 972-923-8159.

Transcripts are not issued until all accounts with the university are paid. Student Records are *confidential* and are issued only at the written and signed request of the student. Transcripts sent to or picked up by the student are stamped "ISSUED TO STUDENT." Many institutions may not recognize a document as official unless it is sent directly from SAGU. SAGU does not fax transcripts without sending a hard copy to the recipient so fax is an additional service.

In order to avoid possible delays in the processing of transcripts, please ensure that all information listed is complete and accurate.

Please Print Clearly

 Last Name First Name Middle Name Other/Maiden

 Street Address

 City State Zip Current Phone Number ()

Last Enrolled at SAGU: () Fall () Spring () Summer Year: _____ Please update my address to one listed above.

SS# _____ - _____ - _____ Date of Birth _____

Signature: _____ Date: _____

Options:

- 3-5 Business Days* Fax (Additional)
 - Overnight Transcript Office Pick Up
 - Hold for Grades Hold for Degree
- _____ Add. Copies (Same Request Only)

* Indicates **processing** time, not delivery time.

Cash/Check
 Credit Card (_____) (_____)
Card Type Security Code
 _____ (_____)
Card Number Exp. Date
 Billing Address: _____

Send Transcript to:

\$7.00 - 3-5 Business Days* \$12.00 - Office Pick Up \$22.00 - Overnight Transcript \$5.00 - Additional Copies (per copy) \$1.00 Additional Charge - Fax	Total Enclosed: \$ _____
--	-----------------------------

Reason:

- Scholarship Personal Transfer
- Employment Other: _____

<u>Office Use Only</u>	
Library: _____	_____/_____/_____ Date Sent
Account: _____	Initials: _____
	Entered: _____