

**WESTERN CONNECTICUT STATE UNIVERSITY**

Office of the Registrar

181 White Street

Danbury, CT 06810

Fax (203) 837-9049

Phone (203) 837-9200

**TRANSCRIPT REQUEST**

Official Transcripts

Unofficial Transcripts

<b>Student Data</b>	STUDENT NAME (Last, First, Middle Initial)	MAIDEN NAME - or name while attending	BIRTH DATE	PHONE NUMBER
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Student ID or Social Security Number
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<b>Mail Transcript:</b> 1. <input type="checkbox"/> Immediately 2. <input type="checkbox"/> After degree is posted 3. After current semester grades for: <input type="checkbox"/> fall <input type="checkbox"/> spring <input type="checkbox"/> summer _____
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Currently Enrolled at WCSU <input type="checkbox"/> Yes <input type="checkbox"/> No		Last Semester or Year Attended			
WCSU Degree (if awarded)	Part Time	Full Time	Summer Only	Undergrad	Grad Student

YOUR NAME AND ADDRESS: Please print clearly


PRINT CLEARLY FOR DIRECT MAILING IN WINDOW ENVELOPES

SEND TO: (Name and address, if to yourself, write SELF


# of copies to be sent to this address

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**TRANSCRIPT INFORMATION**

OFFICIAL TRANSCRIPTS affixed with the university seal are sent directly to a third party. Students may receive an official copy stamped "ISSUED TO STUDENT."

I hereby authorize WESTERN CONNECTICUT STATE UNIVERSITY to release official copies of my academic record to the person or institution named at the left, with the understanding that the named recipient will not release the record to a third party without my written consent.

Date	Signature (Student)
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Date Transcript Sent	
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Falsifying a student's signature is a violation of FERPA regulations.