



TRANSCRIPT REQUEST FORM

Instructions: Please print, complete, and mail this form along with the appropriate fee to the Registrar's Office of Mount Mary College*. Payment must accompany request. Complete one form for each address to which a transcript is to be sent. Transcripts are not issued to a student with financial obligations to Mount Mary College. Failure to complete the transcript request form correctly may result in delay of service.

Contact: Questions regarding transcripts from Mount Mary College should be directed to Karen Adams in the Registrar's Office, (414) 258-4810, ext. 251.

Date _____

Student Name _____

First

MI

Last

Maiden

Current Address _____

Street

City

State

ZIP

Home Phone (_____) _____

Work Phone (_____) _____

Social Security Number _____

Birth Date _____

Name while attending Mount Mary College, if different from above _____

Date of last attendance _____

Check all boxes that apply:

- Please send transcripts from my *Undergraduate coursework*
- Please send transcripts from my *Graduate coursework*
- Include my *teaching credentials* on the transcript
- I would like _____ copies of my transcript
- I am a Mount Mary alumna and graduated on _____

Date

Transcript Priority:

- Regular turn around (five business days)
- Immediate service is available for students who attended Mount Mary after 1990.
- Please send my transcript at the end of the current term

Authorization:

I hereby give consent to have my transcript(s) released to the address below.

Signature _____

Delivery Instructions:

- Please send transcript to me at the address above.
- Please hold transcript for pickup in the Registrar's Office.
- Please mail transcript to:

Name of Institution _____

Attention _____

Address _____

City _____ State _____ ZIP _____

Special Instructions: Please indicate any special instructions you may have regarding receipt of your transcripts.

Mailing Instructions:

Please print, complete, and mail this form along with the appropriate fee to the Registrar's Office of Mount Mary College. Payment must accompany request. Please DO NOT email this form to Mount Mary College.

Registrar's Office
Mount Mary College
2900 North Menomonee River Parkway
Milwaukee, WI 53222-4597

Fees: \$5.00 for each transcript. \$2.00 for teacher credentials. \$10.00 for immediate service.

Payment Options:

- Enclosed is a check payable to Mount Mary College
- Please charge my credit card (check which card type)
 - Visa
 - MasterCard

Account Number _____

Expiration Date _____

Signature _____