



# TRANSCRIPT REQUEST FORM

Note: there is no charge for transcripts; however, official transcripts will not be released until all financial obligations to the university have been met.

## STUDENT INFORMATION

Golden Grizzly Number \_\_\_\_\_ or last four digits of Social Security Number \_\_\_\_\_

Last name\* \_\_\_\_\_ Previous last name(s) \_\_\_\_\_

First name \_\_\_\_\_ Middle initial \_\_\_\_\_

Street address\* \_\_\_\_\_ City\* \_\_\_\_\_ State\* \_\_\_\_\_ ZIP\* \_\_\_\_\_

Would you like us to use this as your permanent address on OU record?\*  Yes  No

Daytime phone\* \_\_\_\_\_ Date of birth\* \_\_\_\_\_

To receive email confirmation, please provide an email address (to be added to your OU record) \_\_\_\_\_

Approximate dates of attendance \_\_\_\_\_ Degree awarded \_\_\_\_\_

Level of study  Undergraduate  Post-baccalaureate  Graduate  Doctoral  Continuing Education (list program) \_\_\_\_\_

Signature\* \_\_\_\_\_ Date\* \_\_\_\_\_

*Electronic Signatures will not be accepted*

## TRANSCRIPT INSTRUCTIONS

Please mail my official transcript to the recipient(s) indicated below

Number of transcripts requested

Please send my transcript now \_\_\_\_\_

I am at the Registrar Service window and will pick up today \_\_\_\_\_

Please send me an unofficial copy of my transcript (select this option if you have holds on your account) \_\_\_\_\_

Please HOLD this request until my grades are posted for  Winter  Summer  Fall \_\_\_\_\_

Please HOLD this request until my degree is awarded in  Winter  Summer  Fall \_\_\_\_\_

## MAILING INFORMATION

Please list the name of recipient and complete address where you would like your transcripts sent.

Accuracy of this information is your responsibility.

Recipient 1: To\* \_\_\_\_\_

Recipient 2: To\* \_\_\_\_\_

Street address\* \_\_\_\_\_

Street address\* \_\_\_\_\_

City\* \_\_\_\_\_

City\* \_\_\_\_\_

State\* \_\_\_\_\_ ZIP\* \_\_\_\_\_

State\* \_\_\_\_\_ ZIP\* \_\_\_\_\_

\* required information

Please mail this completed form to:

Oakland University  
Office of the Registrar  
100 O'Dowd Hall  
586 Pioneer Drive  
Rochester, MI 48309-4401

Fax to: (248) 370-2586  
Email to: trnsrpt@oakland.edu  
Questions? Call (248) 370-3450

**FOR  
INTERNAL  
USE ONLY**

Accepted by \_\_\_\_\_

Picked up by student \_\_\_\_\_

Holds \_\_\_\_\_

Input by \_\_\_\_\_

Proofed and mailed \_\_\_\_\_

Print # \_\_\_\_\_