

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* _____

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 I _____ Summer II _____ Fall _____

Please HOLD this request until my degree is awarded in _____ Winter _____ Summer I _____ Summer II _____ 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
2200 North Squirrel Road
Rochester, MI 48309-4401

Fax to: (248) 370-3890
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 # _____