

TRANSCRIPT REQUEST FORM

Note: If you are waiting for your degree or grade(s) to be posted, you should NOT request your official transcript until you have verified this action is complete in your student portal.

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
160 North Foundation Hall
318 Meadow Brook Road
Rochester, MI 48309-4454

Fax to: (248) 370-2586
Email to: trnsrpt@oakland.edu
Questions? Call (248) 370-3454

**FOR
INTERNAL
USE ONLY**

Accepted by _____

Picked up by student _____

Holds _____

Input by _____

Proofed and mailed _____

Print # _____