



Request for Academic Transcripts

To the student: Although this form is not required when requesting transcripts, it is beneficial since most colleges require a signed, written request for transcripts by the student. Complete the following and submit it to the records office of the college(s) you have previously attended. Please include previous names, if applicable. When requesting transcripts, please note that a fee may be required. If necessary, you may make additional copies of this form.

To the college: In order to complete a student's file, the University must have an official copy of previous college academic transcripts. Please include the student's address on the transcript. Please send the transcript to: The University of Toledo, Office of Undergraduate Admission, Mail Stop 300, Toledo, Ohio 43606-3390.

1. _____
 Last Name First Name Middle Name

_____ 2. Social Security Number: _____ - _____ - _____
 Other Name(s) Used

3. _____
 Permanent Address Number Street Name Apartment Number

_____ City State Zip Code County (if state is Ohio or Michigan)

(_____) _____
 Telephone Number (include area code) E-mail Address

4. Date of Birth: ____/____/____ 5. Gender: Female Male
 Month Day Year

6. I attended _____ from ____/____/____ to ____/____/____
 Month Day Year Month Day Year

Signature: _____ Date: _____



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