



Official Transcript Request

UNIVERSITY OF MARYLAND COLLEGE PARK

PLEASE NOTE: To ensure timely and accurate processing of your request, please complete all sections of this form. Transcript requests are processed in the order in which they are received. If there is a deadline, every attempt will be made to meet the request. Your signature is required for the release of your transcripts. **There is a fee of \$8 per transcript.**

****If your records are from University of Maryland University College (UMUC), please visit www.umuc.edu/students/support/records/transcripts/ to complete a transcript request. You may also call the UMUC Service Center at 1 (800) 888-8682 for additional assistance.****

Today's Date : _____

Student Identification Number	Email Address	Daytime Phone Number
Full Name (Last, First Middle)		Date of Birth
All Former Names		
Date of Attendance (ex: Fall 2002—Spring 2006)	Location of Attendance (ex: UMCP, Shady Grove...)	Degrees Earned (if any)

Recipient #1	Recipient #2
Mailing Address – Please clearly print name and address	Mailing Address – Please clearly print name and address
Number of Copies – (There is an \$8 fee per transcript)	Number of Copies – (There is an \$8 fee per transcript)
Special Handling – (optional) <input type="checkbox"/> Attach separate document (Ex. AMCAS, PTCAS, LSAC, etc.) **Include your form with this request** <input type="checkbox"/> Hold until <u>current</u> semester grades and GPA calculate <input type="checkbox"/> Hold until degree posts <input type="checkbox"/> Graduate level work only	Special Handling – (optional) <input type="checkbox"/> Attach separate document (Ex. AMCAS, PTCAS, LSAC, etc.) **Include your form with this request** <input type="checkbox"/> Hold until <u>current</u> semester grades and GPA calculate <input type="checkbox"/> Hold until degree posts <input type="checkbox"/> Graduate level work only

STUDENT SIGNATURE (MANDATORY) - I acknowledge that I will be charged \$8 per transcript.

x _____

PAYMENT: (Transcript is mailed prior to payment being received)

- Current Student: Transcript will be billed student account
- Former Student Payment Options:
- Check payable to University of Maryland in the amount of _____
- Credit Card # _____; Exp. _____
- Send a bill to the following address: _____

Mail Completed Form to:

University of Maryland
Office of the Registrar
First Floor, Mitchell Building
College Park, MD 20742

Fax to : 301.314.9568

For assistance, please contact the Registrar's Office at (301) 314-8240 or registrar-help@umd.edu.