

<b>For office use only:</b> NH      HOLD: _____
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## TEXAS WOMAN'S UNIVERSITY Transcript Request Form

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A transcript may be requested only by the student to whom it belongs. Official transcripts will be released only when all previous debts to the university have been paid and blocking offices have notified us of your clearance. A TWU transcript is a complete record of a student's enrollment at Texas Woman's University, including all undergraduate, graduate, and professional courses. Partial transcripts are not available.

**No transcript order can be accepted by phone or e-mail.** A fee of \$10.00 per official copy must be paid by check, or money order and a written request containing the following information must be submitted before a transcript can be released.

PLEASE PRINT IN **BLOCK LETTERS**

<b>Full Legal Name</b> _____	_____
<b>ID Number:</b> _____	<b>Previous names used at TWU:</b> _____
<b>Your Mailing Address:</b> _____	<b>Dates of Attendance:</b> _____
<b>City, State, Zip</b> _____	<b>Date of Birth:</b> ____/____/____
<b>Daytime Phone:</b> (____) _____ - _____	<b>Email Address:</b> _____

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**Number of Official Copies:** \_\_\_\_\_      **Payment Amount Enclosed:** \$ \_\_\_\_\_ .00

**Processing Instructions (Circle One):**

- 1) Hold until recent grades are posted for:    **FALL    SPRING    SUMMER**
- 2) Hold until recent degree is posted for:    **DECEMBER    MAY    AUGUST**
- 3) **PROCESS NOW**

**Additional Instructions (Circle One):**

- 1) Pick up in person at Denton Office (allow 2 business days for processing)
- 2) Pick up in person at Dallas Office. (allow 3 extra days for delivery)
- 3) Mail to this complete address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please mail request, along with check or money order for \$10 per official transcript, payable to Texas Woman's University.  
Mailing Address: TWU Transcript Department, Office of the Registrar; P.O. Box 425409; Denton TX 76204-5409

Unofficial transcript: \_\_\_\_\_ Y    \_\_\_\_\_ N  
**\*Only unofficial transcripts may be faxed or e-mailed.**  
Please provide recipient fax number or e-mail address: \_\_\_\_\_

**I authorize Texas Woman's University to mail an official transcript of my academic record to the address listed above. By my signature below I attest that I am the person to whom these records belong.**

**Signed:** \_\_\_\_\_      **Date:** \_\_\_\_\_

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