# Rose-Hulman Institute of Technology
# Transcript Information and Request Form

According to Federal law, the release of your academic transcript in any way requires your signed request.

**Your transcript can be released in any of the following formats**:

- Official transcript picked up in our office or mailed to any address requested.
- Unofficial transcript faxed or e-mailed as a pdf document.

**You may submit a request for your transcript in any of the following ways**:

- **Come to the Registrar's Office** (Room A218, Moench Hall), complete and sign a transcript request form, and usually receive your transcript immediately or leave your request for your transcript to be mailed (official), faxed or e-mailed (unofficial).
- **Fax a signed request** (may use form below) to 812-877-8141.
- **Mail a signed request** (may use form below).
- **E-mail a request** - only acceptable if you are able to attach a scanned request with your actual signature. beverly.turner@rose-hulman.edu or registrar_dept@rose-hulman.edu.

Transcripts are nearly always processed the same day the request is received.

**Cost: Current students and alumni - No Charge** **Former students who did not graduate - $5.00 each**

If payment is necessary, please pay by check made payable to Rose-Hulman or provide credit card information: Amount: $ _____

Cardholder Name: _____ Acct #: _____

Card Billing Address: _____ Card Type: _____ Expiration: _____

_____ Cardholder Signature: _____

**Submit this transcript request to the Registrar's Office by fax (812-877-8141) or mail to**:

Rose-Hulman Institute of Technology
Registrar's Office, CM #2
5500 Wabash Avenue
Terre Haute, IN 47803

**Personal Information**: (Please print clearly)

Name: _____
First Middle Last Maiden Student ID #

Permanent Address: _____
Street Information

_____
City State Zip Phone

**Transcript Level (s):** ☐ Undergraduate Level ☐ Graduate Level ☐ Both ☐ Non-Degree Student Level

**Education Information:** ☐ Current Student ☐ Graduated * ☐ Did not graduate * *Approx. Dates of Attendance: _____

**Other Information (optional but helpful):** Date of Birth: _____ Social Security #: _____

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**Authorization to release transcript : – I authorize issuance of my transcript as indicated below.**

_____
**SIGNATURE (REQUIRED)** Date Daytime phone where you may be reached in case of questions

**Quantity**: _____ ☐ **MAIL** to: _____

Address: _____

_____

_____

**Quantity**: _____ ☐ **FAX or E-Mail** to: _____
(Unofficial)

_____

**Special Instructions:** ☐ Issue at End of Current Quarter ☐ Issue After Degree Posted ☐ Need Transcripts in Individual Sealed and Signed Envelopes

☐ Other (Provide an additional page if necessary) _____