

## Transcript Request Form

<b>Student Information:</b>			
_____		_____	
Full Name	Any other name(s) on record		
_____		_____	
Street Address		Student I.D. Number (WIN) or last 4 of social	
_____		_____	
City	State	Zip	( ) _____
		Phone Number	Date of birth
<b>Program Information:</b>			
_____		_____	Send transcript now, do not hold
Program Attended		Year Attended	Hold for grades: Fall    Spring    Summer
___ OPTIONAL: Send Accuplacer Scores – list institute/send to information below.			
<b>Transcript Release Information:</b>			
___ Official copy (must be mailed and fee paid)		___ Official copy (must be mailed and fee paid)	
___ Unofficial copy (may be sent via fax or mail)		___ Unofficial copy (may be sent via fax or mail)	
_____		_____	
Institution/Person		Institution/Person	
_____		_____	
Street Address		Street Address	
_____		_____	
City	State	Zip	City
			State
			Zip
_____		_____	
Fax number (unofficial copies only)		Fax number (unofficial copies only)	

### Processing Information:

**There is an \$8 fee for each official transcript request.**

- Please note that by signing below, you are authorizing us to provide the person or institution named above with your school transcript, which will include portions of personally identifiable information.
- All financial obligations must be met before transcripts may be released.
- Faxed copies of transcripts are generally not considered official documents. Please check first with the receiving institution to determine their policy.
- Payments may be made by cash, check, money order, or credit card upon completion and submission of this form.
- **Please contact the Washburn Tech Cashier to make payments at 785.670.3363.**
- Please allow at least 2 business days for processing except during peak processing times, such as the beginning or end of a semester, at which time 7-10 business days will be needed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Washburn University prohibits discrimination on the basis of race, color, religion, age, national origin, ancestry, disability, sex, sexual orientation, gender identity, genetic information, veteran status, or marital or parental status. The following person has been designated to handle inquiries regarding the non-discrimination policies: Equal Opportunity Director/Title IX Coordinator, Washburn University, 1700 SW College Ave, Topeka, Kansas 66621, 785.670.1509, [eodirector@washburn.edu](mailto:eodirector@washburn.edu)

**For Office Use Only:** Date Received: \_\_\_\_\_ Payment Received: \_\_\_\_\_ Date Processed: \_\_\_\_\_ Processed by: \_\_\_\_\_