

NAME: _____ STUDENT NUMBER: _____

EMAIL ADDRESS OR PHONE NUMBER: _____

My Unofficial Transcript AND Hold for Final Grades / Degree Posting
THIS
REQUEST
IS FOR: Number of Copies: _____
 A Verification of Enrollment Letter

REASON FOR REQUEST: _____

PLEASE ALLOW 3 TO 5 DAYS FOR PROCESSING!

SEND TO: _____

NOTICE: Transcripts will not be provided for any student whose financial obligations to the university have not been met. ALL financial obligations to the University must be paid before the transcript is mailed. For more information about your account, contact Student Financial Services at (386) 226-6285.

STUDENT SIGNATURE: _____ DATE: _____