

Instructions: Please type/check the appropriate response in the space provided. After the form is complete, please print and sign the form and Mail to: Registrar's Office, 403 Main Street, Box 4271, Grambling, LA 71245, or Fax to (318) 274-2777. For questions or comments please call (318) 274-2612.

GRAMBLING STATE UNIVERSITY REGISTRAR'S OFFICE

Official Transcript Request Form (No fee required for transcripts)

Send Immediately Send After Final Grades are Posted Place in sealed envelope Forward electronic copy

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*****STUDENT INFORMATION*****

First	M.	Maiden	Last

Current Mailing Address			

City	State	ZIP	
_____	_____	_____	
()	-	_____	
Telephone Number		Email Address	

Student ID Number (Gxxxxxxx)

Date of Birth

Date of Request

Number of transcripts requested

Did you graduate? Yes _____ No _____ Date of Graduation

Are you currently enrolled: If not, indicate last attendance date:

Student Signature: _____

OFFICE USE ONLY	
Date mailed: _____	Staff Initials: _____
If denied, Reason:	
_____	Incomplete Credentials (Graduate Studies) - (318) 274-7374
_____	Incomplete Credentials (Undergraduate) - (318) 274-6423
_____	Financial Hold- Contact Student Accounts – (318) 274-2662
_____	Special Hold- _____