

TEXAS SOUTHERN UNIVERSITY

Enrollment Services

Office of the Registrar

3100 Cleburne Street, Houston, Texas 77004

(713) 313-7071

Transcript Request Form

Name _____
Last First Middle

Mailing address _____
Street

_____ *City State Zip*

Date of Birth _____ SS# _____ - -
Month Date Year

Telephone: (_____) E-mail: _____ @

Other names used at TSU: _____
Last First Middle

School (Business, Education, Law, etc.) _____ Degree(s) earned if applicable _____

PLEASE FILL IN THE BLANK AND CHECK THE APPROPRIATE BOX(ES)

Please send _____ official transcript(s) of credit earned by me during my attendance at Texas Southern University.

- Hold for degree. Indicate semester and year of graduation application
- Hold for grades. (Your transcript will be sent when all of the courses in which you are now enrolled have been graded.)
- Hold for grade change. (Your transcript will be sent when Registration and Academic Records receives a change of grade for the course in the semester you indicated below.)

Course Number _____ Section _____ Semester/Year _____

FORM OF PAYMENT

All admission requirements and financial obligations must be met before transcripts are released

Credit Card

Visa MasterCard Discover American Express

Account Number: _____ Expiration Date: _____
Month Year

Name of cardholder: _____
Last First Middle

Cardholder's signature: _____

Check Payment made in the office of the Bursar

Contacted the Bursar's Office

Date _____ Billing Receipts # _____
Month Date Year

CHECK ONE STUDENT WILL PICK UP TRANSCRIPT PLEASE MAIL TRANSCRIPT TO ADDRESS BELOW

Student Name _____
Last First Middle

Address _____
Street

_____ *City State Zip*

Signature _____ Date _____
Month Day Year

All transcript requests require student signature. Federal Law prohibits the release of your transcript without written signature. A computer-generated signature cannot be accepted.