

# Request for Transcript

**Last Name:** \_\_\_\_\_  
**First Name:** \_\_\_\_\_  
**Middle Initial:** \_\_\_\_\_  
**Former Name(s):** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**UNI (if applicable):** \_\_\_\_\_

**CU School(s) attended:** \_\_\_\_\_

**Dates of attendance:**

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

Mail to: <input type="checkbox"/>	Email: <input type="checkbox"/>	# Requested _____
Name _____		
Address Line 1 _____		
Address Line 2 _____		
City _____		
State / Country _____	Zip / Postal Code _____	

Mail to: <input type="checkbox"/>	Email: <input type="checkbox"/>	# Requested _____
Name _____		
Address Line 1 _____		
Address Line 2 _____		
City _____		
State / Country _____	Zip / Postal Code _____	

Mail to: <input type="checkbox"/>	Email: <input type="checkbox"/>	# Requested _____
Name _____		
Address Line 1 _____		
Address Line 2 _____		
City _____		
State / Country _____	Zip / Postal Code _____	

Mail to: <input type="checkbox"/>	Email: <input type="checkbox"/>	# Requested _____
Name _____		
Address Line 1 _____		
Address Line 2 _____		
City _____		
State / Country _____	Zip / Postal Code _____	

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Note:** Some HOLDS may prevent your transcript from being processed and released. Using our self-service tools you must contact the office that imposed the HOLD in order to have it removed.

University Registrar  
[www.registrar.columbia.edu](http://www.registrar.columbia.edu)

**Transcript requests must be submitted electronically:**  
For Morningside students please submit the request to [ssc@columbia.edu](mailto:ssc@columbia.edu)  
For Medical Center students please submit the request to [cumc-rfs@columbia.edu](mailto:cumc-rfs@columbia.edu)