



OFFICIAL TRANSCRIPT REQUEST FORM

UNDERGRADUATE REGISTRAR'S OFFICE
213 WHITMORE ADMINISTRATION BUILDING
UNIVERSITY OF MASSACHUSETTS
181 PRESIDENTS DRIVE
AMHERST, MA 01003-9313

voice 413.545.0555
fax 413.545.2920

STUDENT INFORMATION

Current Name _____
Last First Middle

Former Name (if applicable) _____

Student ID# or SS# _____ Date of Birth _____

Email Address _____ Telephone Number _____

Dates of Attendance _____

Current Mailing Address _____

TRANSCRIPT INFORMATION *(please allow 3-5 business days for processing)*

Number of Transcripts _____

Transcript(s) will be picked up

or

Mail Transcript(s) to:

OR, hold request and
mail transcript(s) after

Fall grades recorded

Spring grades recorded

Winter grades recorded

Summer grades recorded

Degree awarded on transcript

Student Signature Required

Date of Request

Charges:

If you entered the University September of 1990 or thereafter, you have paid a Registrar's Service Fee that entitles you to free transcripts for life.

If you entered the University prior to September of 1990, there is a service fee of \$4.00 for each transcript.