

Request for Transcript

This is a template for your use in requesting an official copy of your academic transcripts from the colleges and universities you attended. At the *School of Continuing Studies* at the *University of Richmond*, we require official transcripts for all college and university work. Transcripts should be forwarded from the respective institutions of higher education to the Associate Dean, School of Continuing Studies.

Name: _____
Last First Middle Maiden/Previous

Address: _____
Street

City State Zip Code

Phone: _____
(Daytime contact number
in case there is a question).

Date of Graduation: _____

Birth Date: _____

Social Security Number **OR** Student ID Number: _____

I authorize the issuance of my transcript to the University of Richmond:

Signature Date

Please send my official transcript to:
Dr. Patricia J. Brown
Associate Dean
University of Richmond
School of Continuing Studies
Special Programs Building
University of Richmond, VA 23173

Transcript fee (if applicable) enclosed: _____
Amount