

Transcript Written Authorization Form

I \_\_\_\_\_ give authorization for

Full Name of Student

\_\_\_\_\_  
Name of Authorized Person(s)

\_\_\_\_\_  
Name of Authorized Person(s)

\_\_\_\_\_  
Name of Authorized Person(s)

**To**

\_\_\_ Request my Official Transcripts

\_\_\_ Pick-up my Official Transcripts

\_\_\_ Request and Pickup my Unofficial Transcripts

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Student # or SSN

\_\_\_\_\_  
Date