

Please allow 3-5 days to process your order. Same-day orders are available for an extra fee and are offered in-person only.

# Transcript Order Form

Today's date
--------------

*Print name as it appears on your official University record.*

LAST NAME		FIRST		MIDDLE	
FORMER LAST NAME		FIRST		MIDDLE	
UW STUDENT #, OR SOCIAL SECURITY #		DATE OF BIRTH		UW EMAIL (PREFERRED)	
CURRENT MAILING ADDRESS					
CITY		STATE		ZIP	
CONTACT PHONE					
ACADEMIC MAJOR		<input type="checkbox"/> UNDECLARED		DATES OF ATTENDANCE AT UW FROM: <input type="checkbox"/> AUT <input type="checkbox"/> WIN <input type="checkbox"/> SPR <input type="checkbox"/> SUM YR _____ TACOMA TO: <input type="checkbox"/> AUT <input type="checkbox"/> WIN <input type="checkbox"/> SPR <input type="checkbox"/> SUM YR _____	

**MAIL TRANSCRIPT TO: (PLEASE PRINT)**  
*If transcripts are to be sent to more than one address, use additional forms.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- I will pick up in MAT 253 (photo ID required)
- Mail immediately to address at left.
- Hold for current quarter grades, then mail.
- Hold for changes, then mail.
- Degree/certificate expected. Hold until posted, then mail.
- Same-day turnaround: In-person only
  - Current student: Charge to account
  - Former student: Complete form and make payment at Cashier's Office (CAR 400), then take form for transcript processing to the Registrar's Office (MAT 253).

X \_\_\_\_\_  
**Student signature (required)**

*For pick-up orders, if you have not picked up your order after 30 days, your transcript will be mailed to the address listed above.*

**OFFICIAL TRANSCRIPT (3-5 DAY TURNAROUND)**

Number of Copies Requested: \_\_\_\_\_

\$11.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

Number of  
Copies requested

**SAME DAY TURNAROUND (IN-PERSON ONLY)**

Number of Copies Requested: \_\_\_\_\_

\$11.00 X \_\_\_\_\_ = \$ \_\_\_\_\_ + \$ 15.00 = \$ \_\_\_\_\_

Number of  
Copies requested

Rush fee

- METHODS OF PAYMENT:**
- Charge Student Account: **CURRENT STUDENTS ONLY**
  - Cash: **IN PERSON ONLY** at Cashier's Office (*Do NOT mail cash*)
  - Visa or MasterCard: **ONLINE ONLY** (*myuw.washington.edu*)
  - Check: **IN PERSON OR BY MAIL** (*payable to "UW Tacoma"*)

**MAIL REQUEST WITH PAYMENT TO:**

**University of Washington Tacoma**  
**Attn: Transcript Request**  
**Campus Box 358433**  
**1900 Commerce Street**  
**Tacoma, WA 98402-3100**

**IN-PERSON at the Cashier's Office in Carlton 400.**

FOR OFFICE USE ONLY	Amount Paid \$ _____
Processed by _____	Date _____ <input type="checkbox"/> ID CONFIRMED