REQUEST FOR TRANSCRIPT OF PLS COURSES

OFFICIAL TRANSCRIPTS are mailed directly from the Registrar's Office to the requested individual(s) (e.g.: college, employers, agencies, etc.)

All transcripts given or mailed directly to the student will be marked "Issued directly to the student". Partial transcripts are not issued. Each transcript includes the complete academic record at Gannon University. All transcripts are free.

NAME: _____
last first middle maiden

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ DAY PHONE (8:00 a.m. - 4:30 p.m.): _____

Most recent PLS class you need to appear on transcript:

TITLE: _____

LOCATION: _____

DATES OF COURSE: _____

MAIL TRANSCRIPT TO:

_____

_____

_____

_____

AND

_____

_____

_____

_____

THIS AREA FOR
OFFICE USE ONLY:

DATE MAILED: _____

DATE MAILED: _____

Signature of Student _____ Date: _____

Return this form to: Gannon University, Registrar's Office, University Square, Erie, PA 16541 All transcripts are free.

DO NOT GIVE THIS FORM TO THE INSTRUCTOR.