TRANSCRIPT REQUEST FORM  
(Please print clearly)

School of Education, Registrar’s Office, 6740 Alexander Bell Drive, Ste 110, Columbia, MD 21046-2100 Phone: 410-516-9816

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
</tr>
</thead>
</table>

Names Previously Used | SSN | Date of Birth |
|----------------------|-----|--------------|

Address | City | State | Country (if not U.S.) | Zip Code |
|---------|------|-------|-----------------|---------|

Day Telephone | Evening Telephone | Email Address |
|--------------|-------------------|---------------|

Dates of Attendance | Degree | Major |
|-------------------|-------|------|

Please check one:  
- Normal Processing time (see above)  
- Hold for in-person pick-up (normal processing time applies)  
- *Same day request and pick-up ($10 charge per transcript)  
- *Special Delivery (FedEx)

Please check one:  
- Hold for degree completion statement  
- Hold for teacher certification  
- Hold for term grade  
- Hold for grade change, course#________________  
- Other___________________________

Number of Copies Requested: ____________

Pick-up Information: ____________________________________________________________

Mailing Address (send to): ____________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Signature: ____________________________________________________  Date: __________

(Request will not be processed without a signature)

*Payment Section for Special Delivery and Same Day Request

NOTE: FedEx delivery must be paid by credit card; Express and Priority Mail must be paid by check; Same Day requests/pick-up may be paid by cash, check or credit card.

<table>
<thead>
<tr>
<th>Method of Payment:</th>
<th>Cash/Amount</th>
<th>Check/Amount</th>
<th>Credit Card/Amount</th>
</tr>
</thead>
</table>

CARDHOLDER’S NAME (Please Print) | CARDHOLDER’S SIGNATURE | CARDHOLDER’S ZIP CODE |

CREDIT CARD NUMBER | CARD VERIFICATION CODE* | EXPIRATION DATE |

□ Visa  □ Mastercard  □ Discover  □ American Express  

*The card verification code is a 3 digit code found on the back of the credit card (usually in or near the signature strip). The code is required as a security feature for the cardholder.