

THIS FORM MUST

BE MAILED TO:

Lehman College ATTENTION: Office of the Registrars Records & Transcripts 250 Bedford Park Blvd. West, Shuster Hall, Rm106 Bronx, New York 10468

TRANSCRIPT REQUEST FORM

NO FAX OR E-MAIL REQUEST WILL BE ACCEPTED! For each Transcript request (official or student copy) there is a fee of \$7.00; however, transcripts to other CUNY institutions are free. Checks or money orders should be payable to: <u>Lehman College</u>. NO CREDIT CARD PAYMENTS WILL BE ACCEPTED WITH THE MAIL REQUESTS.

If you have any Negative Service Indicator(s) on your record, your request cannot be processed without clearance from the appropriate office

PERSONAL INFORMATION: (PLEASE PRINT)

Last Name:	First Name: M.I:
Name while attending Lehman College (if not the same as above):	Select one: Social Security Empl ID (CUNY First)
Address:	Contact Number:
City:	State: Zip Code:
Email Address: @	
YES NO Are you an Alumni/Alumnus?	TES NO Would you like to update your information with Alumni Relations?

DATE OF ATTENDANCE:	CHECK IF APPLICABLE:
Are you currently attending Lehman College?	HOLD for current semester grade
The you currently attending fermion contege.	HOLD for degree award notation
YES NO	REQUEST FOR:
If not, state the semester you last attended	Student Copy **Without School Seal**
Undergraduate:/	Official Transcript - mailed directly to an institution/business.
	*** COMPLETE the name & address of the institution/business below***
Graduate:/	Official Transcript - mailed directly to the student in sealed envelope.
	*** Write ONLY the name of the institution or business below * **
ADDRESS WHERE TRANSCRIPT IS TO BE SENT	f:
Institution/Business Name:	
Attention:	

Address:			
City:	State:	Zip Code:	

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C.S.123g) protects the confidentiality of student's education records. Student records can only be released with the student's written authorization.

This document will not be processed without the student's signature.

 Student Signature______

 FOR OFFICE USE ONLY

 Received Date: ___/__/___

 Processed by: ______

 Date: __/__/___

