

TRANSCRIPT REQUEST

\$8.00 Per Copy

UNIVERSITY OF SOUTH FLORIDA
Office of the Registrar, SVC1034
4202 E. Fowler Avenue
Tampa, FL 33620-6950

Student ID Number _____

USF transcripts are \$8.00 each. Unpaid unsigned requests cannot be processed. Transcripts are prepared for mailing or pick-up **only** within two business days upon receipt of **complete authorized** requests **except during peak periods**. **TRANSCRIPTS CANNOT BE ISSUED UNLESS ALL FINANCIAL OBLIGATIONS ARE SATISFIED.** Submit a separate request for each address to which you want a copy sent.

SPECIAL INSTRUCTIONS - HOLD FOR:

Current Term Grades
 Current Term Degree Semester _____ Year _____
 Grade Change Semester _____ Year _____
 Summer Grades: A C B

TO ORDER TRANSCRIPTS IN PERSON:

Take your payment with this request form to the Cashier's Office on any USF Campus.

TO ORDER TRANSCRIPTS BY MAIL:

Attach your check or money order made payable to the University of South Florida, **Attn: Transcript Clerk** at the above address.

Date of Birth _____

Request Date _____

No. of Copies: _____
(\$8.00 fee per copy)

Telephone No. _____
Area Code

Student's Full Name _____
Last Name First Name Middle/Maiden

Student's E-mail Address _____

Send Transcript To:

Signature of Student (Required)					
Office Use Only					
<small>Date</small>	<small>Amt. Remitted</small>	<small>Pmt Type</small>	<small>Indicator</small>	<small>Waiver Reason</small>	<small>Initials</small>

PLEASE DO NOT WRITE BELOW LINE
PLEASE DO NOT SEPARATE COPIES