

Loyola Marymount University  
**TRANSCRIPT REQUEST**

No transcript of a student's record will be issued for students or alumni whose financial obligation to the university has not been satisfied.

Name:

LAST

FIRST

MIDDLE INITIAL

Student Number:

-   -

Today's Date:

-   -

Telephone:

-    -

Date of Birth:

-   -

Student Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature:

\_\_\_\_\_

Previous Name (if applicable):

\_\_\_\_\_

Transcripts are free of charge and may be requested only by the student whose records appear on the transcript

Are you currently enrolled?

YES

NO (If no, when was your last term?)

FALL

19

20

SPRING

19

20

SUMMER

19

20

Check all levels of course work you have taken at LMU

UNDERGRAD

GRAD

CONTINUING ED.

Do you want this transcript held for any of the following reasons?

In person pickup (available within 5 business days)

Number of copies for pickup: \_\_\_\_\_

Posting of current in-progress grades

Posting of degree, and if so list month and year:

month: \_\_\_\_\_ year: \_\_\_\_\_

Grade change, and if so list course and semester

course: \_\_\_\_\_ term: \_\_\_\_\_

Removal of incomplete, and if so list course and semester

course: \_\_\_\_\_ term: \_\_\_\_\_

Transcript mailing address:

\_\_\_\_\_

How many transcripts

to this address?

\_\_\_\_\_  
\_\_\_\_\_

(if you need more transcripts sent to other addresses please use the back of this form)

Transcript mailing address:

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How many transcripts  
to this address? \_\_\_\_\_

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Transcript mailing address:

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to this address? \_\_\_\_\_

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