



# INDIANA UNIVERSITY

OFFICE OF THE REGISTRAR

Bloomington

## Transcript by Mail

### Identifying Information

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Former Name: \_\_\_\_\_

University ID: \_\_\_\_\_  
(If you know it)

Last 4 SSN: \_\_\_\_\_

Email: \_\_\_\_\_

Confirm Email: \_\_\_\_\_

No Email: Y/N

\*Note: We highly encourage you to provide an email address as email is our method of communicating with you regarding the status of your request.

### Current Address Information

Country: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

Address Line 4: \_\_\_\_\_

City: \_\_\_\_\_

State/Province/Region: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Approximate Dates of Enrollment: \_\_\_\_\_

Completed I.U. Degree(s): \_\_\_\_\_

If you have recently completed an ACP or a School of Continuing Studies online or Correspondence course, please enter the Department & Course Number(s):

\_\_\_\_\_

### Recipient Information

Number of Copies: \_\_\_\_\_

Name: \_\_\_\_\_

Country: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

Address Line 4: \_\_\_\_\_

City: \_\_\_\_\_

State/Province/Region: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Phone (required for FedEx shipping): \_\_\_\_\_

Signed and sealed? Y/N

FedEx Shipping? Y/N

Make check or money order payable to:  
Indiana University

Mail your completed and signed form to:  
Office of the Registrar  
ATTN: Transcripts  
Indiana University  
Franklin Hall 100  
601 E. Kirkwood Avenue  
Bloomington, IN 47405-1223

Student's Signature (or signed release): \_\_\_\_\_

A valid signature is required or your request will be returned to you by mail