HUNTER
The City University of New York

Office of the Registrar
Transcripts Division
Hunter College
695 Park Avenue, Room 217 North
New York, NY 10065

Transcript Request Form

To use this form it must be printed, filled out and mailed to the address above with a check or money payable to Hunter College.

For faster service, you may also order your request online. For more details, please visit our website at http://registrar.hunter.cuny.edu

IMPORTANT NOTICE

Complete all items in ink. There is a $7.00 fee for each copy of your transcript except those sent to a unit of the City University of New York. All academic transcript records (Undergraduate & Graduate) will be included for a $7.00 fee. No request will be processed unless all financial and other obligations to the college have been fulfilled. Requests are processed in the order received. **This form will not be processed without the student's signature.** All transcripts requested with an attached Priority / Express envelope will be processed along with all other requests on a first come, first serve basis. *Transcript records prior to 1960 will require 2 - 3 weeks for processing.* **Please write the last four digits of your SS# on the check.**

__ __ __ - __ __ - __ __ __ __ SOCIAL SECURITY # / ID#

_____# OF COPIES

__ __ / __ __ / __ __ DATE OF BIRTH

Print Your Information Below

_____
Name

_____
Street Address

_____ _____ _____
City **State** **zip code**

Federal law prohibits issuing a transcript without the student's written permission

Send Transcript To The Address Below:

Special Attention To:
(if applicable)

If you attended under a different name print below

_____
Last Name **First Name** **Middle**

Dates of Attendance

( ) Undergraduate _____-_____
Month/Year **Month/Year**

( ) Graduate _____-_____
Month/Year **Month/Year**

Graduate of Hunter College _____
Degree/Year **Degree/Year**

Check if applicable

( ) HOLD for current grades - _____Semester

( ) HOLD for degree awarded notation_____
Degree and Date

( ) HOLD for grade change(s)

_____/_____
Course **Semester** **Current Grade** **Expected Grade**

Student's Signature_____ **Date**_____

**** THIS FORM WILL NOT BE PROCESSED WITHOUT THE STUDENT'S SIGNATURE****