



# TRANSCRIPT REQUEST FORM

Office of the Registrar ♦ 517 Ball Drive ♦ Hanover, IN 47243  
PHONE: (812) 866-7051 ♦ FAX: (812) 866 -7054

**Today's Date:** \_\_\_\_\_ (Please allow 2-3 business days for processing)

Name: \_\_\_\_\_ Student ID or Social Security Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Attendance Dates: _____	Graduation Year: _____
Name Used During Attendance (if different): _____	

**For each official transcript requested, there is a fee of \$6.00. There is no charge for unofficial copies. Any student whose college account is on hold at the time of processing will not be issued a transcript.**

Quantity Ordered Official
_____

Quantity Ordered Unofficial
_____

PICK UP (Please bring photo ID when picking up transcript)

FAX NUMBER (unofficial) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

<b>Hold Transcript For:</b>
Grades: _____ (Term)
Graduation: _____

Reason for Request
<input type="checkbox"/> Transfer
<input type="checkbox"/> Graduate School
<input type="checkbox"/> Scholarship
<input type="checkbox"/> Other

I hereby give my written consent and authorize Hanover College to release my academic records as noted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Transcript cannot be released without signature.)

**OFFICE USE ONLY**

**PAYMENT TYPE**     CASH     CHECK # \_\_\_\_\_     MONEY ORDER

Date Processed: \_\_\_\_\_ Processed By: \_\_\_\_\_ Accepted By: \_\_\_\_\_

Total Cost
\$ _____

MAILING ADDRESS 2

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**Hold Transcript For:**

Grades: \_\_\_\_\_  
(Term)

Graduation: \_\_\_\_\_

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Reason for Request

Transfer

Graduate School

Scholarship

Other

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MAILING ADDRESS 3

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**Hold Transcript For:**

Grades: \_\_\_\_\_  
(Term)

Graduation: \_\_\_\_\_

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Reason for Request

Transfer

Graduate School

Scholarship

Other

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MAILING ADDRESS 4

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**Hold Transcript For:**

Grades: \_\_\_\_\_  
(Term)

Graduation: \_\_\_\_\_

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Reason for Request

Transfer

Graduate School

Scholarship

Other

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MAILING ADDRESS 5

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**Hold Transcript For:**

Grades: \_\_\_\_\_  
(Term)

Graduation: \_\_\_\_\_

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Reason for Request

Transfer

Graduate School

Scholarship

Other

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