



**TRANSCRIPT REQUEST**

**PLEASE NOTE:** This form cannot be processed without the student's signature authorizing the release of records.

Transcripts are free and are processed on a first-in, first-out basis. **We do not provide "Rush" or "Next Day" service.** The normal turn-around time for processing is five (5) to ten (10) working days from the date we receive your request in our office. However, during busy periods (December – February, and May – July) processing time may take longer due to the high volume of requests. **Transcripts must be requested well in advance to meet deadlines.**

Complete this form and submit it to Admissions & Records. You may bring it to our office in Salazar Hall, 2<sup>nd</sup> floor, **OR** mail **OR** fax it to the following address:  
**Sonoma State University**  
 Admissions and Records  
 1801 East Cotati Avenue  
 Rohnert Park, CA 94928-3609  
 FAX (707) 664-2060

Please type or print with ballpoint pen

|  |   |  |  |
|--|---|--|--|
| <b>STUDENT'S LAST NAME (PRINT)</b>   | <b>FIRST NAME</b>   | <b>MIDDLE INITIAL</b>                          | <b>MAIDEN/FORMER NAME(S)</b>   |
| <b>SSU ID (or SSN)</b>   | <b>DAYTIME PHONE</b><br>(   )   | <b>E-MAIL ADDRESS</b>                          |  |
| <b>HANDLING INSTRUCTIONS</b><br><input type="checkbox"/> Send Transcript Now<br><br><input type="checkbox"/> Hold for Degree<br><input type="radio"/> Bachelor's <input type="radio"/> Master's<br>Expected date _____<br><br><input type="checkbox"/> Hold for Final Grades<br><input type="radio"/> Fall <input type="radio"/> Winter<br><input type="radio"/> Spring <input type="radio"/> Summer<br>Year _____ | <b>NUMBER OF COPIES</b> (maximum of 10 copies per request)  |  |  |
|  | <b>TYPE OF ATTENDANCE</b><br><input type="checkbox"/> Regular Session<br><input type="checkbox"/> Extended Education<br><input type="checkbox"/> Both |  | <b>DATES OF ATTENDANCE</b> (term / year)<br>From _____ To _____<br><br><b>Did you attend prior to 1990?</b> <input type="radio"/> Yes <input type="radio"/> No |
|  | <b>STUDENT SIGNATURE (REQUIRED)</b>   |  | <b>DATE</b>  |
| <b>MAIL TRANSCRIPT TO:</b>   |   | <b>STUDENT ADDRESS (required information):</b> |  |
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