



**OFFICIAL TRANSCRIPT
REQUEST FORM**

(RO - 06/22)

Registrar's Office • 200 High Street • Glenville, WV 26351 • 304-462-4117 • FAX 304-462-8619 • registrar@glenville.edu

Student Name: _____ GSU ID#: _____
(or last four digits of SSN)

Previous Names (if applicable): _____ DOB: _____

Address: _____ Home Phone: _____

_____ Cell Phone: _____

_____ Email: _____

☐ Please check here if you attended prior to 1990. ☐ Please check here if you have Graduate level coursework.

☐ Mail ☐ Express Mail ☐ Pick Up

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Special Instructions: ☐ **Hold for current term grades** (if currently enrolled) ☐ **Hold for Degree Statement** (if in last semester)

*Make checks payable to Glenville State University. Credit/Debit cards are accepted by including the information below or contacting 304-462-6120 once the official request has been received. We accept MasterCard, Discover, and Visa. You must have all financial obligations satisfied with GSU or your request will not be processed. The request must be signed by the student. **Unfulfilled requests due to unmet obligations are destroyed after 30 calendar days and a new request will be required.***

\$ _____ Regular Processing - \$7.00

\$ _____ Express Mail - \$42.00 each (includes \$7 transcript fee) **Not available for PO Box and APO addresses.

\$ _____ Total Amount

Credit/Debit Card Number

Exp. Date

3 Digit Security Code

Student Signature Required

Date

***** OFFICE USE ONLY *****

☐ Check/Money Order ☐ Cash ☐ Credit/Debit Card Amount Received: _____ Date Rcvd: _____ Initials: _____

Date Mailed/Faxed/P-Up: _____ HOLDS: _____ Notification Made: _____ Initials: _____