



2020 EAST MAPLE STREET  
 NORTH CANTON OH 44720-3336  
 FAX: 330-490-7372

Date Received \_\_\_\_\_ Fee Paid \_\_\_\_\_ Date Mailed \_\_\_\_\_

## REQUEST FOR TRANSCRIPT OF RECORDS SPECIAL GRADUATE PROGRAMS *(includes special workshops)*

- NOTE: 1. The transcript fee is \$5.00 per copy. Transcripts will not be released if there is a financial obligation to Walsh University.  
 2. A separate request must be completed for each institution or individual to receive a transcript.

|   |                     |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
|---|---------------------|----------------|--|----------------|--------------------|---|----------|---|----------|---|---------|---|----------|--|-------------|---|-----------|---|------------|
| LAST NAME   | FIRST NAME          | MIDDLE INITIAL | <p>If this transcript request <b>is not</b> for the current semester/year, please specify the last semester/year attended:<br/>         Semester _____ Year _____</p> <p>If this transcript request <b>is</b> for the current semester/year, check the session enrolled. <b>Transcripts will be mailed after the current semester. If you are enrolled in multiple sessions, transcripts will be mailed after the last completed semester.</b></p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: left;"><b>SESSION</b></td> <td style="text-align: right;"><b>DATE MAILED</b></td> </tr> <tr> <td><input type="checkbox"/> Spring I (Jan. 1–Feb. 1) .....</td> <td>March 15</td> </tr> <tr> <td><input type="checkbox"/> Spring II (Feb. 2–March 2) .....</td> <td>April 15</td> </tr> <tr> <td><input type="checkbox"/> Spring III (March 3–May) .....</td> <td>June 15</td> </tr> <tr> <td><input type="checkbox"/> Summer I (June 1–30) .....</td> <td>August 1</td> </tr> <tr> <td><input type="checkbox"/> Summer II (July 1–31) .....</td> <td>September 1</td> </tr> <tr> <td><input type="checkbox"/> Summer III (Aug. 1–31) .....</td> <td>October 1</td> </tr> <tr> <td><input type="checkbox"/> Fall I (Sept. 1–Nov. 30) .....</td> <td>January 15</td> </tr> </table> | <b>SESSION</b> | <b>DATE MAILED</b> | <input type="checkbox"/> Spring I (Jan. 1–Feb. 1) ..... | March 15 | <input type="checkbox"/> Spring II (Feb. 2–March 2) ..... | April 15 | <input type="checkbox"/> Spring III (March 3–May) ..... | June 15 | <input type="checkbox"/> Summer I (June 1–30) ..... | August 1 | <input type="checkbox"/> Summer II (July 1–31) ..... | September 1 | <input type="checkbox"/> Summer III (Aug. 1–31) ..... | October 1 | <input type="checkbox"/> Fall I (Sept. 1–Nov. 30) ..... | January 15 |
| <b>SESSION</b>  | <b>DATE MAILED</b>  |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Spring I (Jan. 1–Feb. 1) .....                                 | March 15            |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Spring II (Feb. 2–March 2) .....                               | April 15            |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Spring III (March 3–May) .....                                 | June 15             |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Summer I (June 1–30) .....                                     | August 1            |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Summer II (July 1–31) .....                                    | September 1         |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Summer III (Aug. 1–31) .....                                   | October 1           |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| <input type="checkbox"/> Fall I (Sept. 1–Nov. 30) .....                                 | January 15          |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| STREET ADDRESS  |                     |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| CITY  | STATE               | ZIP            |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| SOCIAL SECURITY NUMBER  |                     | DATE OF BIRTH  |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| DAYTIME TELEPHONE   | RESIDENCE TELEPHONE |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |
| SIGNATURE (Mandatory for release of transcript: Public Law 93.579, Privacy Act of 1974) |                     |                |  |                |                    |   |          |   |          |   |         |   |          |  |             |   |           |   |            |

\_\_\_\_\_ **If faxing, please provide credit card no.**

\_\_\_\_\_ **Exp. Date**

\_\_\_\_\_ **Security Code** (3 digit code located in signature panel)

**Student is responsible for mailing address. (Transcripts sent to the student will be stamped "ISSUED TO STUDENT") Please print clearly.**

|  |
|--|
|  |
|  |
|  |
|  |

**NOTE: Window envelopes are used. Transcript to be sent to the address you have furnished.**

**Transcript requests are normally processed within one week after all grade reports are officially issued by the University.**