INFORMATION ON ORDERING AN OFFICIAL TRANSCRIPT

The Family Educational Rights and Privacy Act of 1974 requires that all transcript requests be in writing, signed and dated by the person to whom the record belongs. Telephone requests CANNOT be accepted.

- You can assist us in giving speedy, accurate service by providing complete information on your request form. This online form is fillable-please **DO NOT USE** your Social Security Number!
- After printing and **physically** signing your request, send it to the address or fax number at the top of the request form. You may also scan and attach the form to an email and send it to: registerusm@maine.edu
- There currently is no fee for a transcript ordered in this way.
- The issuance of partial transcripts is strictly prohibited.
- University policy prohibits issuing transcripts to any student indebted to the University or defaulted on Federal student loans.
- You may come to any of the following campus locations for in person processing of transcripts:
  - 140 Luther Bonney, Portland
  - 107 Bailey Hall, Gorham
  - 119 LAC, Lewiston-Auburn

******No cover sheet is needed******

******Please do not send this instruction page******
TRANSCRIPT REQUEST FORM

Please be sure to completely fill out this form to avoid any delay in processing.

Allow 3-4 Business Days for Processing

STUDENT INFORMATION

Student ID (if known): ___________________ Date of Birth: ___________________

Name: ___________________ All previous names: ________________________

Current Address: ______________________

City: ___________________ State: _______ Zip: _______

Telephone Number: _______ Please update my record

Signature (Required): ___________________ Date: __________

TRANSCRIPT PROCESSING INFORMATION

Are you currently enrolled?  ☐ Yes  ☐ No  If No, last year of attendance _______

Send my official transcript:

☐ Immediately

☐ Hold until degree conferred  Graduation Date: __________

☐ Hold for current semester grades

☐ Fall  ☐ Spring  ☐ Summer

☐ Please send _____ copies to my current address listed above.

Please send _____ copies of my transcript to:

Attention or Department: ____________________________

University or Business: ____________________________

Street Address: ____________________________

City: ___________________ State: _______ Zip: _______

For additional addresses please attach a separate list