



## NWOSU Official Transcript Request Form

709 Oklahoma Blvd., Alva, OK 73717 Fax: 580-327-8699

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ SSN or Student ID#: \_\_\_\_\_

Please list any former last names: \_\_\_\_\_

Current Address (street/box, city, state, zip): \_\_\_\_\_

Current Phone number: \_\_\_\_\_

Number of transcripts requested: \_\_\_\_\_

\_\_\_\_\_ Mail to:

\_\_\_\_\_ **Hold for current semester grades**

Name of person/business: \_\_\_\_\_

\_\_\_\_\_ **Hold for degree statement**

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

If you would like an *unofficial* transcript faxed, please provide a fax number: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

\*This form may be mailed or faxed to the address/fax number listed at the top of this form. Inquiries may be made to 580-327-8554.

\*Transcripts are released ONLY at the request of the student. Official transcripts will NOT be issued if the student has any obligations to the university.