

# Transcript Request Form

Huntington University  
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SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

STUDENT ID# \_\_\_\_\_

NAME: \_\_\_\_\_  
FIRST MIDDLE/MAIDEN LAST

CURRENT ADDRESS: \_\_\_\_\_  
STREET/APT CITY STATE ZIP

TELEPHONE #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

STUDENT'S SIGNATURE: \_\_\_\_\_

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### \*\*PLEASE NOTE:

- TRANSCRIPTS THAT ARE FAXED OR EMAILED CANNOT BE OFFICIAL
- TRANSCRIPTS CANNOT BE SENT IF YOU CURRENTLY HAVE HOLDS OR FINES

