



1601 39th Ave. S.E.  
 Puyallup, WA 98374-2222  
 (253) 840-8400

## TRANSCRIPT REQUEST FORM

(Fill out separate request for each address)

Circle last site attended:

Fort Steilacoom Puyallup Fort Lewis McChord  
 Other \_\_\_\_\_ Attended from \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

LAST NAME FIRST INITIAL STUDENT IDENTIFICATION NO.

ADDRESS NAME ATTENDED UNDER

CITY STATE ZIP BIRTHDATE (M/D/Y)

\_\_\_\_\_  
 # of Unofficial Transcripts  
 TELEPHONE \_\_\_\_\_  
 # of Official Transcripts

EMAIL ADDRESS \_\_\_\_\_

***Please send transcripts to: (Please print)***

Name \_\_\_\_\_

Address \_\_\_\_\_

CITY STATE ZIP

***Please check items that apply:***

- Send a.s.a.p.
- Pickup transcript
- Send after current quarter grades posted:  
 (circle one) Summer Fall Winter Spring
- Hold for grade change:  
 Course & No. \_\_\_\_\_
- Have earned/applied for degree at Pierce?  
 Mo/Yr Graduate(d) \_\_\_\_\_

*Allow 2 to 3 working days for processing transcripts. Transcripts not released if outstanding financial obligation to the college exists.*

Student's signature \_\_\_\_\_  
 (Will not be processed without your signature.)

Date \_\_\_\_\_

**OFFICE USE ONLY**

Date payment received: \_\_\_\_\_ Payment type: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_