

Please complete this request form and submit it in person or by mail to Student Records at the address shown above. NOTE: Mailing time is not included in the five (5) working day turnaround.

Last Name:		First Name:		Middle Name:	WSU ID No. or SSN:
Previous name(s) under which your transcript might be filed:		Birth Date (mm/dd/yyyy):	Work Area Code & Phone #: ()		Home Area Code & Phone #: ()
Please specify the service you are requesting: <input type="checkbox"/> Enrollment verification <input type="checkbox"/> Degree certification <input type="checkbox"/> Loan Deferment Form processing			FOR STAFF USE:		
Please specify the term/year for which service is requested. Winter/ _____ Spring-Summer/ _____ Fall/ _____ If you are requesting enrollment verification or loan deferment forms for future terms, the forms will not be processed until the first official day of classes for that term.					
Please specify pick-up or mailing preference: <input type="checkbox"/> I will pick up the information in five (5) working days. <input type="checkbox"/> Please mail the information: <input type="checkbox"/> Envelope provided. <input type="checkbox"/> Address for mailing: _____ _____ _____					
Additional Information and Instructions:					
Student Signature:				Date Signed (mm/dd/yyyy):	