



Office of Academic Records  
Transcript Request Form

Use this form only if you are sending check or money order for payment; if using credit card, go to National Student Clearinghouse at [www.studentclearinghouse.org](http://www.studentclearinghouse.org) to order and pay electronically.

Student's Name: \_\_\_\_\_  
(Last) (First) (MI)

Previous Names: \_\_\_\_\_  
(If different than above; including maiden name)

Student's ID# or ssn: \_\_\_\_\_ DOB: \_\_\_\_\_  
(month/Day/year)

Dates you attended this institution: \_\_\_\_\_  
(from: month/year) (to: month/year)

Send Transcript(s): \_\_\_\_\_ Now \_\_\_\_\_ Other: \_\_\_\_\_  
(\$5.00 per copy) (Number of Copies) (Hold for Degree to be posted  
or Hold for Grades to be posted)

Mail: \_\_\_\_\_ Sealed Envelope with Registrar's Signature on Back: \_\_\_\_\_  
(If multiple copies are being sent, specify if separate envelopes are needed per copy.)  
(\$5.00 per copy)

Send To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pick Up: \_\_\_\_\_ Sealed Envelope with Registrar's Signature on Back: \_\_\_\_\_  
(\$5.00 per copy)

If you wish to have someone else pick up transcripts, print the name below:

\_\_\_\_\_  
(Name of person picking up transcript; will require ID of authorized person)

**REQUIRED:**

Include check or money order for full payment with all written requests

**\*\*Make Checks Payable to: University of Tennessee at Martin**

Contact Phone Number: \_\_\_\_\_

Contact E-mail Address: \_\_\_\_\_

Handwritten Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return this form to: UT Martin  
Academic Records Office  
103 Hall-Moody Administration Building  
Martin, TN 38238