

TRANSCRIPT REQUEST

The Student Services Division will need to have the graduate's request in writing, along with proper proof of identification. The request should include all information below with an approved signature for release of information. It will take 1-2 business days to process. An incomplete request form will result in a delay.

Student Services fax number is 410-479-3269.

Date of Request: _____

Name at time of graduation/on diploma: _____

Telephone/Cell #: _____

School of Graduation: _____ Date of Birth: _____

Year of Graduation: _____ I will: Pick up Please mail to:

Signature of Graduate: _____