VCU Strategic Enrollment Management and Global Initiatives

Transcript Request

Student Information

Last: First: MI:

Student V Number (9-digits):

☐ I authorize the release of my academic records to the individual named below.

Contact Information

Name:

Street: City: State: Zip:

Phone: Email:

Send Transcripts to (Print Clearly)

Name:

Street: City: State: Zip:

Phone: Email:

Date of Birth:	
Maiden/Other Last Name:	
Year of Last VCU Graduation:	
Dates of Attendance:	
Special Instructions:	

Transcript Information

☐ Official # of copies ☐ To be pickup ($10 per copy) ☐ To be pickup ($10 per copy)

Type of transcript

☐ Undergraduate ☐ Graduate ☐ Professional

Hold Transcripts Until:

☐ End of fall semester ☐ End of spring semester ☐ End of summer semester

☐ Posting of degree ☐ End of intersession

Student Signature: Date:

Please Return to the Office of the University Registrar
Monroe Park Campus
1015 Floyd Ave., room 1100
P.O. Box 842520
Richmond, VA 23284-2520

Transcripts are sent via US Postal Service first class mail, express mail or can be picked up by the requester. Only five transcripts can be requested per day. Allow five days for processing. The charge for transcripts is $10 per copy for first class mail or pick up. Payment should be mailed with your request form as a check or money order payable to VCU. Please do not send cash. When delivering a request in person, please pay the cashier before submitting.

For Office Use Only:

Date Sent: _____

VCU Office of Student Financial Services
Grace E. Harris Hall 1015 Floyd Avenue, Suite 1100
P.O Box 843036
Richmond, VA 23284
Website: https://sfs.vcu.edu