

Phone: (254) 519-5857
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TEXAS A&M
UNIVERSITY
CENTRAL TEXAS

REQUEST FOR OFFICIAL UNIVERSITY OF CENTRAL TEXAS TRANSCRIPT

Last Name, First Name MI

Date

Student ID #

Number of Copies (max 10 per semester)

Dates Attended (MO/YR)

Date Graduated (MO/YR)

If you need transcripts mailed to different address you must use a separate form for each.

- | | |
|--|--|
| <input type="radio"/> Student Copy (not officially sealed) | <input type="radio"/> Officially Sealed Envelope |
| <input type="radio"/> Undergraduate (Bachelor) | <input type="radio"/> Graduate (Master) |
| <input type="radio"/> Mail Now | <input type="radio"/> Pick Up |
| <input type="radio"/> Hold for Grades | <input type="radio"/> Hold for Degree Posting |

Mail Transcript to: _____

Transcripts are not issued until all holds and obligations with the University are cleared.

Signature

Address

Phone Number

Please return to: Founder's Hall 108 or Fax: 254-519-5486 or Email: records@tamuct.edu

Registrar's Office | 1001 Leadership Place | Killeen, TX 76549 | (254) 501-5857