



# TRANSCRIPT REQUEST FORM

**ROGERS STATE UNIVERSITY  
OFFICE OF THE REGISTRAR  
CLAREMORE, OKLAHOMA 74017**

**This request *must* be submitted with a copy of some form of ID with signature.**

Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Last term attended RSU: \_\_\_\_\_

Daytime phone #: \_\_\_\_\_

List **all** former names that appear on any academic records: \_\_\_\_\_  
\_\_\_\_\_

Your complete mailing address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of transcripts requested: \_\_\_\_\_

\_\_\_\_\_ Mail transcript now

\_\_\_\_\_ Mail transcript at the end of the semester

**We must have a copy of your ID to process this request. Please attach it to this form.**

Examples: Driver's License, Student ID

If you have any questions feel free to call us at: **(918) 343-7799**

List all persons and institutions to which your official transcript should be mailed. Include full name and complete mailing address. *PLEASE PRINT LEGIBLY.*

1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

You may request a transcript in one of three ways:

1. In person (fill out form and provide Picture ID)
2. Mail request to:  
**Rogers State University  
Attn: Registrar's Office  
1701 W. Will Rogers Blvd.  
Claremore, OK 74017**
3. Fax request to:  
**(918) 343-7595**

**At this time we are unable to process E-mail requests.**