

**School of Public Affairs
Baruch College / CUNY
17 Lexington Avenue, Box C-0313
New York, NY 10010-5518**

TRANSCRIPT REQUEST FORM 1

Applicant: Please fill out this form and forward it with a self-addressed envelope to your previously attended college or university. A transcript must be submitted from EACH college or university previously attended, even if you did not enroll in courses in your field.

Please be sure to send this request early to ensure that the transcript will be returned to you in a timely manner. Note: You must comply with the policy of each institution regarding transcript release regulations and fees.

Applicant's Name _____
First Middle Last (Family) Prior Name on Transcript

Social Security Number _____ Date of Birth _____

Dates of Enrollment _____ to _____ Degree and Graduation Year _____

I hereby request that my transcript be sent to my address in the envelope that I have provided with this form:

Signature of Applicant _____ Date _____

Registrar: The above named person is applying to Baruch College of The City University of New York. Please enclose this form together with an official transcript in the envelope provided. After sealing the envelope, please sign across the seal and return it to the applicant so that it can be included with his/her application package. If the applicant has not provided an envelope, please use one of your own. If it is against the policy of your institution to release official transcripts to students, please send the transcript directly to the School of Public Affairs at the address given at the top of this form.

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17 Lexington Avenue, Box C-0313
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TRANSCRIPT REQUEST FORM 2

Applicant: Please fill out this form and forward it with a self-addressed envelope to your previously attended college or university. A transcript must be submitted from EACH college or university previously attended, even if you did not enroll in courses in your field.

Please be sure to send this request early to ensure that the transcript will be returned to you in a timely manner. Note: You must comply with the policy of each institution regarding transcript release regulations and fees.

Applicant's Name _____
First Middle Last (Family) Prior Name on Transcript

Social Security Number _____ Date of Birth _____

Dates of Enrollment _____ to _____ Degree and Graduation Year _____

I hereby request that my transcript be sent to my address in the envelope that I have provided with this form:

Signature of Applicant _____ Date _____

Registrar: The above named person is applying to Baruch College of The City University of New York. Please enclose this form together with an official transcript in the envelope provided. After sealing the envelope, please sign across the seal and return it to the applicant so that it can be included with his/her application package. If the applicant has not provided an envelope, please use one of your own. If it is against the policy of your institution to release official transcripts to students, please send the transcript directly to the School of Public Affairs at the address given at the top of this form.

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