

# TRANSCRIPT ORDER FORM

OFFICE OF THE REGISTRAR, UNIVERSITY OF MICHIGAN



## Student Information

\_\_\_\_\_  
Last Name First Name Middle Name

\_\_\_\_\_  
Former/Maiden Name (if applicable)

\_\_\_\_\_  
UMID or last four of SSN Date of Birth

to

\_\_\_\_\_  
School or College Years Enrolled Degree Received

to

\_\_\_\_\_  
School or College Years Enrolled Degree Received

\_\_\_\_\_  
Current Address Apt. #

\_\_\_\_\_  
Current Address (continued)

\_\_\_\_\_  
City State or Province Postal Code

\_\_\_\_\_  
Email Phone Country (if not US)

\_\_\_\_\_  
Date

**HANDWRITTEN SIGNATURE REQUIRED**

Please return this form by email, mail, or fax, contact information is listed below. Please attach a second page of addresses if necessary. Preparation of transcripts normally takes two business days.

Orders without a handwritten signature will not be processed.

Official transcripts may be sent to the student or a third party. Unofficial transcripts may only be sent to the student or a University of Michigan department.

Transcript delivery via email is not available to students or alumni who last attended prior to Fall 1993, were enrolled in a Residential College course prior to Fall 1996, last attended Law School prior to May 2000, or last attended Medical School prior to 1996.

Transcript Department  
Office of the Registrar  
University of Michigan  
500 S. State St., LS&A Suite 5000  
Ann Arbor, MI 48109-1382  
Phone: 734.763.9066  
Fax: 734.764.5556  
[ro.transcript.order.questions@umich.edu](mailto:ro.transcript.order.questions@umich.edu)

## Delivery Information

<b>Send Official Transcripts</b>	Number _____	My Address Above or	Number _____	My Address Above or
Name	_____		_____	
Address	_____		_____	
City	_____		_____	
State and Postal Code	_____		_____	
Fax number or email	_____		_____	

<b>Send Unofficial Transcripts</b>	Number _____	Attention	_____
		UM Department	_____
My Address Above	or	UM Room/Address	_____
		UM Campus Zip	_____