



Office of the Registrar
Official Transcript Request Form
Fax: 318-670-6344

Name: _____ Last 4-digits of SSN: _____ DOB: _____

Maiden Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email Address: _____ (requested for notification purposes)

Dates of Attendance at SUSLA: First Semester _____ Last Semester _____
(semester/year) (semester/year)

REASON FOR TRANSCRIPT REQUEST: Transfer Employment Self
 Other _____

CHECK BELOW:

- Student Pick-Up Mail (via US Postal Service) e-SCRIP (via electronic transcript service)
- Hold for Final Grades Hold for Degree Hold for Grade Change
- I am a SUSLA graduate: _____ Year _____ Degree _____

NUMBER REQUESTED: _____ PAYMENT AMOUNT: \$ _____

PLEASE ISSUE AN OFFICIAL COPY OF MY TRANSCRIPT TO:

Name (Organization): _____

Attention: _____ Department: _____

Address _____
Street Address City State Zip

In order to comply with the Privacy Act of 1974, transcripts of credits will be supplied to all students and former students only when requested in writing. All financial obligations must be paid in full.

Please allow 3-5 days to process this request. During peak times, such as registration, graduation and the beginning or ending of a semester/term, the process may be delayed. There is a \$3.00 processing fee (Cash, Credit Card, or Money Order ONLY). NO CHECKS PLEASE. To pay by phone, please call the Cashier at 318-670-9305.

Student's Signature _____ Date _____

To ensure that no person can obtain your information without your permission, if you have designated someone (designee) to receive this information for you, please identify the person by name and ensure the designee is able to provide picture identification upon receipt. Name: _____

Note: This request will be retained in the Registrar's office for one semester/term. It is the student's responsibility to follow up on the status of his/her request. After this designated period the request will be destroyed and the student will be required to resubmit a request and the required fee.