



**Request for College Transcripts**

Please Print

\_\_\_\_\_  
Year(s) Attended College

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

\_\_\_\_\_  
Birth Date

\_\_\_\_\_  
Maiden Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Name of College

\_\_\_\_\_  
Address

\_\_\_\_\_  
City of College

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Send Official Transcript to your campus:**

**Boca Raton Main Campus**  
Everglades University Registrar  
5002 T-REX Avenue, #100  
Boca Raton, FL 33431  
Phone: (561) 912-1211  
Fax: (561) 912-1191

**Sarasota Branch Campus**  
Everglades University Registrar  
6001 Lake Osprey Drive, #110  
Sarasota, FL 34240  
Phone: (941) 907-2262  
Fax: (941) 907-6634

**Orlando Branch Campus**  
Everglades University Registrar  
887 East Altamonte Drive  
Altamonte Springs, FL 32701  
Phone: (407) 277-0311  
Fax: (407) 482-9801

**For Office Use Only**

1st Request       2nd Request

Phone Number \_\_\_\_\_ Amount of Fee \_\_\_\_\_ Check No. \_\_\_\_\_

Comments \_\_\_\_\_

*Most colleges require a processing fee.  
To avoid delay in mailing, please check with your college before sending this request.*