



Everglades University REQUEST FOR OFFICIAL TRANSCRIPT

TO:

Name of High School / GED Institute

Address

City

State

Zip

Phone Number

Please forward a copy of this request form with an official transcript of completed courses to the following address:

Everglades University
ATTN: REGISTRAR
5002 T-REX Avenue, #200
Boca Raton, FL 33431
Phone: (855) 723-9087 / Fax: (561) 988-9903

Please include the school's seal, signature, and date of graduation on the transcript.

I submit the following information to aid in locating my records:

Name:

First

Middle

Maiden

Last

Current Address:

City

State

Zip

Date of Birth:

Social Security #:

High School Graduation Date:

GED Completion Date:

E-SIGNATURE:

DATE:

WET

SIGNATURE:

DATE:
