TRANSCRIPT REQUEST FORM

Saint Louis University
School of Law Registrar
100 N. Tucker Blvd.
St. Louis, MO 63101-1930
Phone: 314-977-3312
Fax: 314-977-2030

Please fill out all information, print form and sign it.
You may fax, mail or return this form in person.

SPECIAL INSTRUCTIONS

Hold transcript until grades are posted for
_________________________ semester, 20____

Hold transcript until degree is posted, anticipated
month of graduation ______________________

Other:
__________________________________    ______________________________________

OFFICE USE ONLY

Date Processed ___________________   Initials ___

SAINT LOUIS UNIVERSITY will release the records you authorize with this injunction to the recipient: Pursuant to Federal Law 93-308, this personal information is transferred only on the condition that you will not permit any other party to have access to such information without the written consent of the student.