Transcript Request Form (TRF)
Prairie View A&M University
P. O. Box 519; MS 1002
Prairie View, TX 77446-0519
TP (936) 261-1000   FAX (936) 261-1051

Note: Current students should order transcripts on-line via Panthertracks (http://www.pvamu.edu/pvplace)

**(Please print)
Student
Name &
Mailing
Address**

_____
_____
_____
_____

**(Please print)
Mail
Transcript
To or pick up**

_____
_____
_____
_____

Required Information:

Social Security Number	**IMPORTANT:**
Birth Date (MM/DD/YY)	• **Transcript requests are not accepted via telephone calls or e-mails.**
Dates Attended PVAMU MO | YR TO MO | YR	• No transcript of a student's record will be issued for a student with outstanding financial obligations.
Maiden or Previous Names	• Transcripts may be released only with the student's written authorization.
Daytime Telephone No.	• ALLOW 2-3 week days for processing. (USPS mail time not included)
Date of Request	• YOU are responsible for the accuracy of the addresses you supply.
Student's Signature	• Transcripts will be delivered via mail or in person <u>only</u>.
	• Any transcript that we provide to the student will indicate "ISSUED TO STUDENT". Some institutions/agencies do not consider these to be official. Be sure to check with the institution/agency that wants the transcript to see what they consider to be official.

_____ Number of copies (Limited to 5 transcripts per day)

Type of Transcript: (Select all that apply)

_____ **Undergraduate**   _____ **Graduate**   _____ **Certification**

_____ **Doctoral**

Office Use Only:

Processed by:

Date:

Rev. 8/06/13