

Texas A&M University

Office of Admissions and Records
P.O. Box 40001
College Station, TX 77842-4001

Transcript Request

To Be Completed by the Applicant

U.S. Social Security Number _____ - _____ - _____

Name _____
Last or Family Name First Middle Maiden/Other

School _____

Dates of enrollment _____ Degree and year _____

I authorize the release of transcripts of my academic record to Texas A&M University.

Signature _____ Date _____

Registrar: This person is applying for admission to Texas A&M University. We would prefer to receive the transcript electronically in the SPEEDE format. Otherwise, please enclose this form along with two transcripts in an official university envelope addressed to the applicant. Seal the envelope; date and sign, stamp, or place your seal on the back flap; and return it to the applicant. Be sure to include instructions on how to interpret the transcripts and an explanation of your grading system. If the transcripts are not in English, include an English translation. If the academic records cannot be forwarded, please indicate the reasons. If your policy does not allow returning the sealed envelope to the candidate, please send it directly to Graduate Admissions Processing at the address listed above and notify the applicant that you have done so.

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