

# Request for Transcript

**To Be Completed  
by the Applicant:**

LAST OR FAMILY NAME FIRST MIDDLE MAIDEN OR OTHER

Date of birth: \_\_\_\_\_ School: \_\_\_\_\_

Dates of enrollment: \_\_\_\_\_ Degree and year: \_\_\_\_\_

I authorize the release of a transcript of my academic record to The George Washington University's:

- |   |  |
|---|--|
| <input type="checkbox"/> Columbian College of Arts and Sciences             | <input type="checkbox"/> School of Business                        |
| <input type="checkbox"/> Elliott School of International Affairs            | <input type="checkbox"/> School of Engineering and Applied Science |
| <input type="checkbox"/> Graduate School of Education and Human Development | <input type="checkbox"/> College of Professional Studies           |

I am applying to: \_\_\_\_\_  
PROGRAM DEGREE

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
STREET

CITY STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

**Registrar:**

This person is applying for admission to The George Washington University. Please enclose form along with one transcript 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.

Be sure to include instructions on how to interpret the transcript and an explanation of your grading system. If the transcript is not in English, include an English translation. If a copy of the student's academic record cannot be forwarded, please indicate the reasons. If your policy does not allow returning the sealed envelope to the applicant, please send it directly to the appropriate school at The George Washington University, Washington, DC 20052, and notify the applicant that you have done so.