



# Official Transcript Request Form

We cannot accept EMAIL requests!

Sign & mail this form to the campus you last attended: Rutgers, The State University of NJ, ATTN: Records & Transcripts Office. Requests may be FAXED (with no priority handling) to avoid mail delays. **Please allow 7-10 business days for ALL processing**, according to the date of receipt in our office. **Instant transcripts are not available**. There is no transcript fee.

New Brunswick Registrar  
ASB, Room 200L  
65 Davidson Road  
Piscataway, NJ 08854-8096  
FAX: 732-445-5948

Newark Registrar  
Blumenthal Hall, Rm 309  
Newark, NJ 07102  
FAX: 973-353-1357

Camden Registrar  
311 North 5th Street  
Camden, NJ 08102  
FAX: 856-225-6453

Name (last, first, middle initial): \_\_\_\_\_

If you previously attended Rutgers University under a different name, please list it (last, first, middle initial, maiden):  
\_\_\_\_\_

RUID #: \_\_\_\_\_ SSN #: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Currently enrolled:  Yes  No Class Yr: \_\_\_\_\_ RU Degree(s): \_\_\_\_\_ Year of Degree: \_\_\_\_\_

Check Here  If you want your SOCIAL SECURITY NUMBER printed on the Transcript.

Current Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

I Authorize you to Release Transcripts of my:  Undergraduate Schools Only  ALL Work  
 Graduate Schools Only  ALL Work

HOLD for:  Degree  Spring grades  Fall grades  Summer/Session grades  Winter Session grades  
 Release Immediately

School attended: Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_  
ONLY ATTENDED SUMMER SESSION - Year(s) \_\_\_\_\_ or WINTER SESSION - Year(s) \_\_\_\_\_

Please send Official Transcript(s) to the address(es) below - Please list the Name, title, and address of person(s) or institution(s) to whom you wish this transcript sent:

Name/Address #1 \_\_\_\_\_  
# of copies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name/Address #2 \_\_\_\_\_  
# of copies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_