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Transcript Request Form

Complete ONLY for Pre-1984 attendees OR cash/check payment OR unofficial transcript

TYPE OF TRANSCRIPT:

_____ # of Official Transcripts @ \$12.00 each check box for emailed Unofficial Transcript (no charge)

STUDENT INFORMATION:

Currently or Previously Enrolled In:

Undergraduate courses (Bachelor) Graduate courses (Masters/Certificate/Common Ground) GR (Profess.Dev.)

Dates Attended: _____ to _____ **If attended pre-1984, unable to send official transcripts by email or fax*

Name: _____ Student ID # or Last 4 Digits of SSN: _____

If Different Name While Attending: _____ Date of Birth: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____ Email Type: Personal McDaniel Work

Please Update My Information: Yes No

PLEASE NOTE: COLLEGE REGULATIONS DO NOT PERMIT THE ISSUING OF TRANSCRIPTS
FOR ANY STUDENT WITH AN OUTSTANDING DEBT TO THE COLLEGE.

MAILING INSTRUCTIONS: (Please allow approximately 3-5 business days for processing)

Company and/or Name: _____ Attention: _____

Address: _____

City: _____ State: _____ Zip: _____

STUDENT SIGNATURE: _____ **Date:** _____

Please send completed form by mail, fax, or email (transcripts@mcdaniel.edu)

Pay online at: https://webapps.mcdaniel.edu/online_payment/pay.php

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Initials/Amount Paid/Rec'd Date: _____ Initials/Processed Date: _____