Official Transcript Request Form
Office of the University Registrar

Student Information

(Please Print)

TAMIU ID (or last 4 of SSN) ____________________________________________

Other names that may appear in our records (if applicable)

Current Full Name ____________________________________________________

Date of Birth ________________________________________________________

Dates of Attendance - (MM/YY) (for former students only) ________________

Daytime Phone Number ________________________________________________

Degree(s) Awarded (if applicable) ______________________________________

Other names that may appear in our records (if applicable) ________________

Email Address ________________________________________________________

Request Information

Note: All official transcripts are sealed in an envelope. Transcripts that are handed or mailed directly to the student will have “Issued to Student” stamped on the front of the envelope. The transcript fee is $7.25 per transcript. Unless specified below, transcripts will be processed immediately. *Transcripts will NOT be released until all applicable holds are cleared.

Check those that apply:

☐ Transcript(s) to be issued directly to student - Number of copies to be issued to student: ________

☐ Transcript(s) to be mailed - Number of copies to be mailed: ________

Additional Options:

☐ Hold for Current Semester Final Grades

☐ Hold for Current Semester Degree Posting

☐ Transcript with notarization

For Transcripts to be mailed, provide address information below:

1.) ______________________________________________________ 2.) ______________________________________________________

______________________________________________________________

______________________________________________________________

______________________________________________________________

Total number of transcripts requested: ________ X $7.25 = __________

Additional instructions (e.g.: who is authorized to pick up your transcript):

______________________________________________________________

Signature

Student’s Signature __________________________________________ Date __________

Additional Information

*Payment: A check, money order or credit card may be used to pay. Payment must be made directly to the Business Office by phone at (956) 326-2141 or in person at ZSC 137. DO NOT PROVIDE ANY PAYMENT INFORMATION ON THIS FORM.

*Any forms required to be included with transcript must be included with this request.

Office Use Only

Transcript Type: Banner / PRC Holds? Y / N Receipt #: __________ Processed by: __________ Date ________

5201 University Blvd. • Laredo, TX, USA 78041-1900 • Ph.: (956) 326-2250 • Fax: (956) 326-2249

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