



## *Academic Transcript Request Form*

- This form is to be sent to the University or College you previously attended. This would include institutions where you received a degree or completed coursework transferred from other institutions that make up your degree requirements.
- This form is not required but is supplied for your convenience in applying to any of the La Salle University's graduate programs.
- Any transcript request fees required from each institution should be sent along with this form to speed the process of your request.
- La Salle University requires official transcripts that bear an official seal and/or signature.

Applicants Name: \_\_\_\_\_  
Institutional Identification Number: \_\_\_\_\_  
Please indicate any other name that might appear on credentials supporting this application: \_\_\_\_\_  
School: \_\_\_\_\_  
Date(s) of Enrollment: \_\_\_\_\_ Degree and Year: \_\_\_\_\_

I hereby authorize the release of my academic transcript to La Salle University.  
Please send it directly to the following address:

La Salle University  
Office of Graduate Enrollment  
Box 826  
1900 West Olney Avenue  
Philadelphia, Pennsylvania 19141

Thank you for your assistance.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Institutional Comments:

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