



## Unofficial Transcript Request Form for Former Students

**Please mail this completed form along with a required self-addressed, stamped return envelope.**

- **Former students** needing an unofficial transcript should use this mail-in form and include a self-addressed stamped return envelope.
- Former students may also obtain unofficial transcripts in person by stopping by the Registrar's Office in St. Michael Hall during regular business hours.
- Please do not email this form.
- **Current students** may access their unofficial transcript from Colleague Self-Service in [my.sf.edu](https://my.sf.edu).

**Please print, complete, and mail this form with a self-addressed, stamped return envelope to the Registrar's Office:**

University of Saint Francis  
Attn: Registrar's Office, Saint Michael Hall  
2701 Spring Street  
Fort Wayne, IN 46808

**HOLDS:** If you have a financial hold on your account, you can only obtain an unofficial copy of your transcript. Official copies will not be released until the hold has been lifted. For questions about a financial hold on your account, please contact the Business Office at **260-399-8004**. Transcripts are prepared by the Registrar's Office, which may be reached at **260.399.8061** or [registrar@sf.edu](mailto:registrar@sf.edu).

**A NOTE ABOUT OFFICIAL TRANSCRIPTS:** The fastest, cheapest, and easiest way to order OFFICIAL transcripts is by using our online transcript vendor, Parchment. Please go to [Parchment.com](https://Parchment.com) to place your order for all official paper, digital, emailed, paper-mailed, or pick-up transcripts. Unofficial transcripts are not available through Parchment.com.

### FORMER STUDENT INFORMATION (PLEASE PRINT CLEARLY)

In compliance with FERPA Act of 1974, written authorization from the former student is required to release an academic transcript.

Social Security Number or Student ID# (**required**): \_\_\_\_\_ Birth Date: \_\_\_\_\_

First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_ Other possible Last Names: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

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

Attended: ☐ University of Saint Francis ☐ Lutheran College of Health Professions ☐ St. Joseph's Hospital School of Nursing  
☐ Saint Francis College ☐ Lutheran Hospital School of Nursing

Dates Attended: \_\_\_\_\_

***I authorize the release of my unofficial academic transcripts.***

✕ Former Student Signature REQUIRED: \_\_\_\_\_ Today's Date: \_\_\_\_\_

### REQUEST

Number of UNOFFICIAL transcripts requested (Free): \_\_\_\_\_

Updated 8/2025