

## Higher Education Transcript Submission

First Name:	Middle Name:	Last Name:	
Email Address:	Phone Number:	Student ID:	Overall GPA:
Institution Name:	Semester Requesting Support For:	Method of Transcript Submission:	
Financial Aid Office Address (where check will be sent)		Financial Aid Office Email Address	
-	emission Form: This form is to be used ation they originally requested the higher	,	•
Submission Requirements:			
• Unofficial transcripts ar	and submit a Transcription Submission : re acceptable.  forms will not be accepted.	form with transcri	pts.
-	funds are dispersed within 4-6 weeks <u>afte</u>	er receipt of transc	ripts.
	summer courses, please provide proof of e	-	-
*Transcripts MUST be sub	bmitted AFTER prior semester grades and fall semester, you will submit the transcri	nd GPA have been	posted. (I.E. If you are
The above information, and	d all additional information in the applica	ation and	
Signature	Date		