



\*Please email completed form to [transcripts@tsc.edu](mailto:transcripts@tsc.edu)

# Official Transcript Request

NAME: \_\_\_\_\_ DOB: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ TSC ID: \_\_\_\_\_  
*(Please print)*

PHONE Home:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Other:(\_\_\_\_) \_\_\_\_ - \_\_\_\_

E-MAIL: \_\_\_\_\_

OTHER NAMES WHICH MAY APPEAR ON ACADEMIC RECORDS: \_\_\_\_\_

**NOTE:** Official records for courses taken between 1925 to 1989, prior to the partnership of UT Brownsville and Texas Southmost College, require additional time to produce. Please allow us 2-3 business days to process this request.

## INDICATE DISTRIBUTION

*Please specify Department or Person at college/university. Complete one form per address. Student is responsible for providing CORRECT and COMPLETE address (number, street, city, state, and zip code).*

Number of transcript(s) Mail to: \_\_\_\_\_

College/University: \_\_\_\_\_

Department/ Attention to: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

\_\_\_\_\_

## TSC ACADEMIC HISTORY

First/Last Enrolled: \_\_\_\_\_

Degree(s)/Year Received: \_\_\_\_\_

Hold for posting of current semester grades

Hold for posting of degree notation

Number of transcript(s) for Self Pick Up \_\_\_\_\_

(NOTE: Limit of 5 official transcript)

## SPECIAL INSTRUCTIONS (USE FOR Self Pick-Up ONLY)

I authorize \_\_\_\_\_ to **pick up** for my official transcript.

**I have notified the party listed above that this request will not be honored without his/her photo identification**

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

***Transcripts that are not picked up within 4 weeks will be shredded.***

## OFFICE OF ADMISSIONS & RECORDS USE ONLY

PERC \_\_\_\_\_

Received by: \_\_\_\_\_

DATE: \_\_\_\_\_