

VASSAR COLLEGE  
Office of the Registrar  
845.437-5270

Transcript Requests

Federal law requires that we have a signed request from you before we can send your transcript. Please complete one form for each address for which you are requesting a transcript. Those forms may be mailed, faxed, or emailed as an attached pdf to:

Office of the Registrar  
Vassar College  
Box 11  
124 Raymond Avenue  
Poughkeepsie NY 12604-0011

Fax: 845.437-7060  
Email: transcripts@vassar.edu

Please allow adequate time for processing requests. While most requests are fulfilled within two business days, there are peak times when up to five business days are required. This is especially important during the semester break when the Office is closed for approximately one week between Christmas and New Year's Day. There is no fee for transcript requests.

We do not send transcripts for students who have an outstanding financial obligation with the College. If you are unsure of your financial status, please contact the office of Student Accounts at 845-437-5245.

Transcripts of work taken at other institutions must be requested from said institution.

Please provide us with a daytime number and email address in case we need to contact you about your request:

Daytime phone number: \_\_\_\_\_

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

Today's date: \_\_\_\_\_

**Transcript Request**

PLEASE PRINT PLAINLY (for direct mailing in window envelope)

**FROM**

STUDENT ID#	CLASS YEAR
NAME	
HOME OR LOCAL ADDRESS	
CITY, STATE, ZIP CODE	

NAME UNDER WHICH YOU ATTENDED VASSAR COLLEGE, IF OTHER THAN ABOVE

**MAIL OR EMAIL TRANSCRIPT TO**

NAME, DEPT. OR COMMITTEE
INSTITUTION
STREET
CITY, STATE, ZIP CODE

VASSAR COLLEGE  
Office of the Registrar  
Poughkeepsie, N.Y. 12604

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**Student signature ▲**

Requests cannot be processed without a signature. The enclosed transcript is sent at the request of the student.

Are you currently enrolled? YES  NO

If yes, should we hold for final grades? YES  NO

Number of copies requested \_\_\_\_\_

**To be completed by Registrar**

Date transcript sent _____
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