



# Columbus State University

## Request for Official Transcript

To: \_\_\_\_\_ Date \_\_\_\_\_

Name of College/University or High School

**Office of the Registrar/Students Records Section**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, and Zip +4 Code

**I am making a formal application for admission to Columbus State University.**

**Please send an Official Copy of the Document Checked Below to:**

**OFFICE OF ADMISSIONS  
COLUMBUS STATE UNIVERSITY  
4225 UNIVERSITY AVENUE  
COLUMBUS GA 31907-5645**

\_\_\_\_\_ **HIGH SCHOOL TRANSCRIPT.** Date graduate(d) from school \_\_\_\_\_

\_\_\_\_\_ **GED Scores.**

\_\_\_\_\_ **COLLEGE TRANSCRIPT.** Last enrolled in institution: \_\_\_\_\_

\_\_\_\_\_ **Hold for current grades:**

Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name on record if different from present name: \_\_\_\_\_.

**If there are any fees involved, please advise me at the address below:**

*Signature of Student* \_\_\_\_\_

*Print Name (First, Middle, Last)* \_\_\_\_\_

*Street Address* \_\_\_\_\_

*City, State, and Zip +4 Code* \_\_\_\_\_

**Documents MUST be sent from institution to Columbus State University to be official.  
Unofficial or Student Copy Transcripts are not acceptable.**