



TRANSCRIPT REQUEST FORM

To order a transcript student/former student must fill out a Transcript Request Form:

PLEASE COMPLETE ALL INFORMATION:

Name: _____
Last First Middle/Maiden

Date last attended: _____ Graduate: _____ Non-Graduate: _____ Date of Birth: _____

Cell/Home Phone: (_____) _____ Work Phone: (_____) _____

Email Address: _____

For which degree do you desire your transcripts: (place year received in blank in front of degree)

- _____ Associate of Arts _____ Master of Arts _____ Doctor of Philosophy _____ Other list below
 - _____ Bachelor of Arts _____ Master of Ministry _____ Doctor of Ministry
 - _____ Bachelor of Applied Science _____ Master of Divinity _____ Non-Matriculation
-

Department:

__Biblical Studies __ Communications __ Education __ Psychology/Christian Counseling __ Seminary

Total Number of Transcripts Needed: _____ Official Copy: _____ Unofficial Copy: _____
(\$10.00 charge per official transcript, no charge for unofficial transcripts; official copies must be mailed)

Transcripts must be paid for in advance. You can pay online at www.lbu.edu, call 318-686-2360 and pay with a debit/credit card or mail in a check or money order with request.

Name(s) and address(es) of recipient(s) of official transcript (institution, employer, or agency, etc.):

1. _____

2. _____

TRANSCRIPT AUTHORIZATION: All requests for transcripts require a signature. Once completed and signed, it can be mailed to 6301 Westport Avenue, Shreveport, LA 71129, faxed to: 318-688-2148 or e-mailed to info@lbu.edu

Student's Signature (required by Public Law 93-380) Date