

REQUEST FOR UNOFFICIAL TRANSCRIPT



SOUTHERN
ADVENTIST UNIVERSITY

Records and Advisement

Mon-Thurs 8:30am-4:30pm | Fri 8:30am-12:00pm

PO Box 370, Collegedale, TN 37315-0370

Phones: 423.236.2972 or .2921

Email: transcripts@southern.edu

Fax: 423.236.1899

southern.edu/records

STUDENT INFORMATION

Date: _____ SSN: _____ Southern ID: _____ DOB: ____/____/____
month day year

Name: _____ Dates Attended: _____ to _____
year year

Phone: _____ Email: _____

Other Names Used at Southern: _____

SIGNATURE (*required*): _____

I authorize Records and Advisement to release a copy of my unofficial transcript to me or to the institution/agency/person named below. I understand that this is for evaluative purposes only and cannot be used for recording coursework.

RECIPIENT INFORMATION

- This form is not for *Official* transcripts – to send *Official* transcripts, request online at southern.edu/records
- We do not fax, email or mail any *Unofficial* transcripts to Chattanooga State Community College

Person: _____ Department: _____

Institution/School/Business: _____

Email: _____ Fax: _____
please print clearly

Mailing Address: _____

DISCLAIMER

If you request that the Office of Records and Advisement fax your Unofficial Transcript to you personally or to another person, institution or agency, your transcript may be received in an open area and may be seen by persons other than for whom it was intended. Your signature signifies that you release Southern Adventist University of all responsibility for confidentiality of your academic record when it is faxed to the number on the request.

RECORDS AND ADVISEMENT USE ONLY

Faxed: _____ Mailed: _____ Emailed: _____ Picked Up: _____

Initials: _____