CLAYTON STATE UNIVERSITY
Office of the Registrar

2000 Clayton State Boulevard
Morrow, GA 30260-0285
Phone: (678) 466-4145
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www.clayton.edu

REQUEST FOR DOCUMENTS FROM STUDENT FILE

This form is used to request an unofficial copy of your high school or college transcript. By law, Clayton State University is unable to provide official copies of transcripts submitted. ***All copies of documents are unofficial and are released to the student only.***

_____

Last Name *First Name* *Middle Name* *Other Last Name(s)*

_____ _____

Laker ID *Last Term Attended*

_____

Current Mailing Address

_____ _____

Telephone Number *Email Address*

Documents(s) requested (all documents released to the student are unofficial copies only; if an official copy is required, the original institution must be contacted by the student):

❑ High School Transcript

❑ College Transcript*

*Please indicate which college(s):_____

How would you like to receive your requested document(s)?

❑ Pick up

❑ Mailed to your home address

Signature _____ **Date** _____