



Transcript Request

Office of the Registrar Phone (254) 295-4510
 UMHB Box 8425 Fax (254) 295-5052
 900 College Street registrar@umhb.edu
 Belton, Texas 76513

Instructions: Download and complete the request form. You may mail, fax, email, or hand deliver your request to the Registrar's Office.

UMHB ID # _____ Date of Birth _____ Social Security #: _____
(optional)
 Dates of Attendance: Start: _____ End: _____ Date Graduated: _____

Name: _____		
Last	First	Middle
Previous (Maiden) Last Name(s): _____		
Address: _____		Cell Phone: _____
_____		Home Phone: _____

<input type="checkbox"/> Check if this is a new address or phone number.		

Official

****Use a separate form for each addressee****

Number of Copies: _____

Mail Transcript to: _____
(Provide complete name & mailing address.
 Allow 7-10 days for mail delivery)

Unofficial

E-mail Address: _____

Fax to – Name: _____

Fax to – Number: _____

Mail Transcript to: _____
(Provide complete name & mailing address.
 Allow 7-10 days for mail delivery)

- (Please choose one)
- Pick Up or Send Now
- Hold for Grades
- Hold for Degree
- Overnight mailing – see below for additional information

- (Please choose one)
- Current Student Enrolled in Classes
- No longer Attending UMHB
- Alumni *Graduated* from UMHB

Signature: _____ Date: _____
 I certify that I am the person whose name appears on the name line of this form.

Transcript service will be denied to students with outstanding financial obligations to UMHB.
 Allow 2 to 3 business days for processing.
*Overnight Fee is \$12 - Fee subject to change and payable in advance. Credit card payments take 24 hours to process.
 FED EX requires a physical address, not a PO Box Number
 For more info: <http://registrar.umhb.edu/how-request-transcript>*

The Family Educational Rights and Privacy Act (FERPA) of 1974 prohibits the release of transcripts without the student's written consent.

For office use only: Date processed/ Initials: _____	Circle: Picked Up Mailed Faxed Emailed Fed-Exed
Special Instructions: _____	
<input type="checkbox"/> O/N <input type="checkbox"/> O/N pmt rec'd Tracking # _____	