



Release transcript under the following conditions:

- "as is"
- After current term grades are posted
- After Degree is posted

## REQUEST FOR OFFICIAL TRANSCRIPT

Please send an official transcript to the address below. Thank you.

HODGES UNIVERSITY  
Attn: Registrar's Office  
4501 Colonial Blvd.  
Fort Myers, FL 33966

### STUDENT INFORMATION

STUDENT NAME: \_\_\_\_\_

STUDENT ADDRESS: \_\_\_\_\_

CITY, STATE ZIP: \_\_\_\_\_

NAME WHEN ATTENDING INSTITUTION: \_\_\_\_\_

DATES OF ATTENDANCE: From: \_\_\_\_\_ To: \_\_\_\_\_

STUDENT SS #: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

### INSTITUTION INFORMATION

NAME OF INSTITUTION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

STUDENT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_