



**COLLEGE TRANSCRIPT REQUEST FORM**

To the Cleveland State University Applicant:  
Please complete this form and submit to the Registrar's Office at the previous institution(s) you have attended. Please consult with the institution(s) for the procedures and processing costs associated with transcript requests.

To the College / University:  
Please send my official academic transcript to the following address:

Cleveland State University  
Admissions Application Processing  
Cleveland State University  
1836 Euclid Avenue, UN 443  
Cleveland, OH 44115

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First Name                      Middle Name                      Last Name

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Birthdate                      Social Security Number or College ID Number

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From                      To  
Dates of Attendance

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Signature                      Date