Transcript Requests

Federal law requires that we have a signed request from you before we can send your transcript. Please complete one form for each address for which you are requesting a transcript. Those forms may be mailed, faxed, or emailed as an attached pdf to:

Office of the Registrar
Vassar College
Box 11
124 Raymond Avenue
Poughkeepsie NY 12604-0011

Fax: 845.437-7060
Email: transcripts@vassar.edu

Please allow adequate time for processing requests. While most requests are fulfilled within two business days, there are peak times when up to five business days are required. This is especially important during the semester break when the Office is closed for approximately one week between Christmas and New Year's Day. There is no fee for transcript requests.

We do not send transcripts for students who have an outstanding financial obligation with the College. If you are unsure of your financial status, please contact the office of Student Accounts at 845.437-5245.

Transcripts of work taken at other institutions must be requested from said institution.

Please provide us with a daytime number in case we need to contact you about your request:

Daytime phone number: ______________________________________

Email address: ______________________________________________

Today's date: ____________________________________

Transcript Request

PLEASE PRINT PLAINLY (for direct mailing in window envelope)

FROM

STUDENT ID#  CLASS YEAR

NAME

HOME OR LOCAL ADDRESS

CITY, STATE, ZIP CODE

NAME UNDER WHICH YOU ATTENDED VASSAR COLLEGE, IF OTHER THAN ABOVE

MAIL OR EMAIL TRANSCRIPT TO

NAME, DEPT. OR COMMITTEE

INSTITUTION

STREET

CITY, STATE, ZIP CODE

Student signature ▲

Requests cannot be processed without a signature. The enclosed transcript is sent at the request of the student.

Are you currently enrolled? YES ❑ NO ❑

If yes, should we hold for final grades? YES ❑ NO ❑

Number of copies requested __________

To be completed by Registrar

Date transcript sent __________