Transcript Request
Hyles-Anderson College, Crown Point, IN 46307  fax: 219-558-2617

You may email your signed form to the academic dean: dstubblefield@hylesanderson.edu
- There is a 2-business day processing period for transcript requests.
- At the beginning or end of a semester, please allow one week.
- Transcripts will not be released to a student or former student whose Business Office account is not up-to-date.
- There is a $10 charge for transcripts.

Please print all information:
Name_____________________________________________________________________________________

Last              First              Middle/Maiden(Include all former names)

Date of Birth__________________

Home Phone(___)_____________ Work Phone(___)_______________ Email address___________________

Home Address________________________________________________________________________________

City________________________ State________________________ ZIP________________________

Last year enrolled at HAC:________

Check all applicable items:
☐ Official Transcript (sent directly to an institution, employer, or agency). *See below.
☐ Self Official Transcript (addressed to an institution, employer, or agency, although mailed to you). Name of final recipient required.
   *See below.
☐ Unofficial Transcript (one copy per student). Scanned or faxed transcripts are unofficial.
   Mailed unless otherwise stated. ☐ Email ☐ Fax_________________
☐ Counter Pick-up for Self-Official or Unofficial Transcripts.
☐ Hold for Final Grades: (Transcript will not be held unless indicated below).
   ☐ December ☐ May ☐ August ☐ Independent Learning Course:____________________________

*Name and address of recipient of official transcript (institution, employer, or agency):
Name___________________________________________________________________________________
Address_________________________________________________________________________________

City________________________ State________________________ ZIP________________________

TRANSCRIPT AUTHORIZATION

__________________________________________________________
Student handwritten signature (required by Public Law 93-380)   Date