



## ORLANDO CAMPUS OFFICIAL TRANSCRIPT REQUEST FORM

Dear Registrar:

Name of Institution (Please Print):		
Address:		
City:	State:	Zip Code:

**PLEASE SEND AN OFFICIAL COPY OF MY TRANSCRIPT TO THE  
FOLLOWING:**

**ADMISSION OFFICE  
POLYTECHNIC UNIVERSITY OF PUERTO RICO – ORLANDO CAMPUS  
550 North Econlockhatchee Trail  
Orlando, FL 32825**

<b>BACKGROUND INFORMATION (PLEASE PRINT)</b>		
Last Name:	First Name:	Middle Initial:
Maiden Name:	SSN:	
Address:		
City:	State:	Zip Code
Phone:	Email Address:	
Date of Birth:	Date of Attendance (mm/yr):	
Graduation Year (if applicable):		

**ENCLOSED IS MY CHECK / MONEY ORDER IN THE AMOUNT OF \$ \_\_\_\_\_**

*I am responsible for any transcript fees. If there is a problem in processing this request,  
please notify me as soon as possible.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Thank You for Your Attention.

### OFFICIAL TRANSCRIPTS

A transcript will not be considered official by Polytechnic University of Puerto Rico – Orlando Campus unless it is sent ***DIRECTLY*** from your previous school or college to the Admissions office. It may not pass through the student and be considered official. Due to federal regulations Polytechnic University of Puerto Rico – Orlando Campus requires that an official transcript be on file.