TRANSCRIPT REQUEST FORM
MARIST COLLEGE
PLEASE PRINT CLEARLY

Student Name: ______________________________________    Date: ______________________
CWID/SSN: ___________-_______-__________    Date of Birth: ______________________________
Previous/Maiden Name: _____________________________    Day Phone #: _______________________
Complete Address:  ____________________________________________________________________
                                                  Street Address    City/State/Zip

Number of Copies to be sent: ________

Mail Transcripts to: REQUESTER IS RESPONSIBLE FOR A CLEAR, COMPLETE AND ACCURATE ADDRESS

School/Business or Name: ________________________________________________________________
Office/Department:  _________________________________________________________________
Street Address:  _________________________________________________________________
City/State/Zip:   _________________________________________________________________

Attendance at Marist (complete all that apply):

Dates of Attendance: _________________________________________________________________

_____ Currently Enrolled    _____ Not Currently Enrolled

_____ Graduate    _____ Undergraduate

_____ Graduation Date: _______________________________________________________________

Hold Transcript For (check one):

_____ Do NOT hold, send transcript now

_____ Hold for current semester grades: Fall ____  Spring ____  Summer ____  Winter ____

_____ Hold for notation of degree: Month _____  Year _____  Degree _____

Student Signature: _____________________________________________________________

Requests cannot be processed:
• Without the student’s handwritten signature
• Without clearance from Student Financial Services IF a financial hold exists on your record

Submit via Email or Fax to:
Fax: (845)575-3129
Email: transcript.request@marist.edu

Submit via US Mail to:
Marist College – Attn: Registrar’s Dept.
3399 North Road
Poughkeepsie, NY 12601

Regarding Emailed Requests: This form must be filled out, include a handwritten signature, and then be scanned and sent via email as an attachment.

If you have access to your MyMarist portal, you can submit a web portal request by logging in at My.Marist.edu. If you don’t remember your portal login information, please contact the Helpdesk for a recovery: Helpdesk@marist.edu | (845)575-4357.