

Schiller International University Transcript and Release Form

Please forward a copy of my official transcripts to: Schiller International University
Office of the Registrar
8560 Ulmerton Road
Largo FL 33771

High School Graduate

Name of High School: _____

Street Address: _____

City, State, and Zip: _____

Name as it appears on Transcript: _____

GED Certificate Holder

Name of Testing Site: _____

Street Address: _____

Name as it appears on Certificate: _____

Date Certificate was issued: _____

Certification

I certify that I have graduated from the high school indicated above, or have received the GED indicated above. I request that a copy of the transcript or GED certificate be forwarded to Schiller International University at the address above.

Official transcripts of all undergraduate and graduate programs sent directly to Schiller International University Registrar's Office from the Registrars' Office of each college previously attended.

International Student's Only

Applicant's whose degree was taken in a language other than English must submit a certified true copy of the transcript in English translation and a certified true copy of the transcript in the original language.

Please return this form, or a copy of it, with my transcript or GED scored to assist in identification of my file.

Applicant's Name (Please print) _____ Social Security _____

Applicant's Signature _____ Date _____

Admissions Representative's Signature _____ Date _____