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**BUonline Admissions Office**

717 Frederica Street, Owensboro, KY 42301

BUonline@brescia.edu, (270) 686-4353

**Transcript request form**

This form is used by Brescia University BUonline for the sole purpose of requesting transcripts on behalf of our prospective students. The prospective student’s signature on this form grants Brescia University the right to request transcripts directly from the institutions previously attended. If Brescia University is unable to obtain transcripts for any reason, the prospective student will be responsible for obtaining transcripts.

**Please send one (1) official transcript for the following student to:**

Electronic transcripts: BUonline@brescia.edu

Please confirm receipt by emailing BUonline@brescia.edu or by phone at (270) 686-4353. Send official electronic transcripts via secure website to BUonline@brescia.edu. Otherwise, please mail an official paper copy. Thank you!

Mail: BUonline Admissions Office

717 Frederica Street

 Owensboro, KY 42301

**Information on Institution Attended**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Institution attended (No Abbreviations): |  | Click or tap here to enter text. |  |
| Campus: Click or tap here to enter text. |  | Attended Online (Yes/ No)? : Click or tap here to enter text. |  |
| City: Click or tap here to enter text. |  | State: Click or tap here to enter text. | Zip Code: Click or tap here to enter text. |
| Month/ Year you started: Click or tap here to enter text. |  | To Month/ Year you stopped attending: | Click or tap here to enter text. |
| Student ID #: Click or tap here to enter text. |  | Degree Earned: Click or tap here to enter text. |

**Student Information**

|  |  |
| --- | --- |
| (Legal) First Name: Click or tap here to enter text. |  |
| (Legal) Last Name: Click or tap here to enter text. |
| Date of Birth: Click or tap here to enter text. |
| All Previous Names: Click or tap here to enter text. |
| Current Address: Click or tap here to enter text. |
| City: Click or tap here to enter text. |  | State: Click or tap here to enter text. | Zip Code: Click or tap here to enter text. |
| Email: Click or tap here to enter text. |
| Phone Number: Click or tap here to enter text. |

**Student Signature**\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* I hereby authorize a faxed or emailed copy of this signature to be used in lieu of the original.

**Student must submit signed form by email to BUonline@brescia.edu, or mail to:**

BUonline Admissions Office

717 Frederica Street, Owensboro, KY 42301

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**In order to process this request, all fields must be entered completely and the prospective student must have completed an application for admission to Brescia University.**