



**Pitzer College Unofficial Transcript
Request Form**

Fax: (909) 607-7161
Pitzer College Registrar's Office
1050 North Mills Avenue
Claremont, CA 91711
Phone: (909) 607-2650

**Please print clearly using black ink.*

UNOFFICIAL Transcript

Date of Request: _____ Number of Copies: _____

Student's Name: _____
(as it appears/d on your transcript & student record while enrolled at Pitzer)

SS# or Pitzer ID#: _____ **OR** Birth Date: _____

Contact Telephone Number: (____) _____

Please check all that apply:

A: Currently Attending:

Yes – Circle one: FR SO JR SR

No – List dates of attendance _____

UNOFFICIAL TRANSCRIPTS MAY BE FAXED TO A PERSONAL FAX WITHIN 24

HOURS OF REQUEST – no charge. Personal Fax Number: _____

PROVIDE MAILING ADDRESS IF YOU WISH TO RECEIVE VIA MAIL:

Address to send unofficial transcript(s):

Name: _____

Street Address: _____

City, State, Zip Code: _____

Student's Signature – Do not print

Allow 3 -5 business days for processing.