



Office of the Registrar
50 Oakland Street Wellesley Hills, MA 02481
Phone: (781)239-2550
Email: registrar@massbay.edu Website: www.massbay.edu/registrar

TRANSCRIPT REQUEST FORM

Requests may be submitted by postal mail, in-person (photo ID required) or email to registrar@massbay.edu. Transcript requests are free of charge. Transcripts picked up or requested by a person other than the student themselves will require a written and signed permission letter from the student, in addition to a photo ID. Transcripts are only processed/issued at the written and signed request of the student.

For electronic transcript requests, please visit: www.massbay.edu/transcriptrequest to place an order via Parchment, our authorized transcript vendor.

Please Print Clearly

MassBay Student ID Number: _____ **OR** Social Security Number (Optional): _____

Date of Birth: _____

Current Full Name: _____

Previous, Maiden or Other Name Used: _____

Current Address: _____

City/State/ Zip Code: _____

☐ Check if above address is new

Personal Email Address: _____

Cell Phone: _____ Home Phone: _____

Approximate Dates of Attendance: From _____ To _____

Date/Year of Graduation (if applicable): _____

Request Type:

☐ Official Transcript Number of Copies Requested: _____

☐ Unofficial Transcript Number of Copies Requested: _____

If you would like your unofficial transcript emailed, please indicate email address: _____

Mail Transcript To:

Please provide full recipient name/address in spaces below

Name: _____

Address: _____

Address: _____

City/ State/ Zip Code: _____

Student Signature: _____ Date: _____

For Office Use Only:

Date Received: _____ Date Completed: _____ Processed By: _____