

Troy State University-Atlantic Region
Unofficial Transcript Request Form
5425 Robin Hood Road • Suite B1•Norfolk, VA 23513

**Please complete the information below and fax to (757) 274-0483 or deliver/mail to
Student Records Coordinator.
Processing time for all requests is 48 hours.**

Date: _____

Name as student: _____

SSN: _____

Person to whom the transcript is to be released to: _____

Please provide a copy of my unofficial transcript to the following address/fax number:

I authorize release of my information according to the information provided above. I understand that Troy State University can not be held liable for misdirected requests.

Signature: _____