

ATTENTION: If you attended the **ASU Technical Center** at **Marked Tree** or **Jonesboro** between **July 2002** and **June 2008**, please request your transcript from **ASTATE**. Contact **ASTATE** (www.astate.edu)



7648 Victory Blvd / Newport, AR 72112

Email your request:
transcripts@asun.edu

Transcript & Records Request

ID/SSN: _____ **Telephone:** (____) _____ **Email:** _____
Must have ID/SSN to process request

LAST NAME	FIRST NAME	MIDDLE
ADDRESS	CITY	STATE
		ZIP

Maiden Name / Other names used at ASUN: _____ **Date of Birth:** _____

Please check ALL that apply:

- _____ I was a **Concurrent** student in high school (approximate semester if unsure) _____
- _____ I currently attend ASUN
- _____ I **last** attended ASUN (approximate semester if unsure) _____
- _____ I attended the **ASU Technical Center** at **Marked Tree** or **Jonesboro** between **July 2002 & June 2008**
- _____ I attended the **Delta Vocational Technical School/Delta Technical Institute** between **1967** and **2001**

Please check ALL that apply:

- _____ Send *official transcript now. How many copies? _____
- _____ Send *official transcript after latest grades have posted
- _____ Send *official transcript after degree posts to my transcript
Degree you will earn _____ / Term you will complete degree _____
- _____ Send immunization record [if on file]
- _____ Send test scores on file [if on file]

Please list the name or institution and complete mailing address below.

*We mail all official transcripts via USPS, in a sealed envelope, on secure transcript paper with school seal & registrar's signature.
At this time, we do not send transcripts electronically.*

Recipient #1

Recipient #2

Signature

Date