



## TRANSCRIPT REQUEST

To: \_\_\_\_\_  
Name of the college/university/seminary from which you are requesting a transcript

Please send an official copy of my transcript to: *Logsdon Seminary*  
*Hardin ★ Simmons University*  
*Box 16235*  
*Abilene, TX 79698-6235*

The name on my transcript is (first, middle, last) \_\_\_\_\_  
(print or type)

Social Security Number \_\_\_\_\_

Current Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Other last names which may be on my transcript, such as maiden names or previous married names are:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates I attended are: From: \_\_\_\_\_ / \_\_\_\_\_ to: \_\_\_\_\_ / \_\_\_\_\_  
(semester) (year) (semester) (year)

Signed: \_\_\_\_\_

**Important Note to Students Requesting Transcripts:**

For copies of transcripts to be official they must be sent directly from your school/university/seminary to Logsdon Seminary. *Transcripts received in any other way are not going to be viewed as official.*

**DO NOT SEND THIS FORM BACK TO LOGSDON SEMINARY. SEND IT TO THE SCHOOL OR UNIVERSITY FROM WHICH YOU ARE REQUESTING OFFICIAL COPIES OF YOUR TRANSCRIPTS.**

