



REQUEST FOR STUDENT INFORMATION

**Please give your full name and mailing address.
Print legibly, this label will be used for mailing.**

Fax#: (972) 613-7598

Instructions: Use this form to request a copy of your student financial statement, unofficial grade report, unofficial Amberton transcript, degree plan or transfer of credit report. Fill out the form completely with your name, AUID or SSN, mailing address, signature, and a phone number where you can be reached during the day. Be sure to write or print legibly so we may respond to your request without delay.

AUID/SSN _____ - _____ - _____ **Daytime Phone#** _____

Fax # (if applicable) _____

Please send the following information:

Student Financial Statement
 Transfer of Credit Report
 Unofficial Copy of Transcript
 Unofficial Grade Report (Indicate Session and Year) _____
 Degree Plan

If requesting a Degree Plan, please check the desired:

Undergraduate	Graduate
<input type="checkbox"/> BA Professional Development (14)	<input type="checkbox"/> MA Christian Counseling (40)
<input type="checkbox"/> BBA General Business (31)	<input type="checkbox"/> MA Professional Counseling (23)
<input type="checkbox"/> BBA Management (32)	<input type="checkbox"/> MA School Counseling (41)
<input type="checkbox"/> BBA Management Accounting (33)	<input type="checkbox"/> MA Professional Development (17)
<input type="checkbox"/> BBA Project Management (36)	<input type="checkbox"/> MBA General Business (42)
<input type="checkbox"/> BS Applied Studies (34)	<input type="checkbox"/> MBA Management (43)
<input type="checkbox"/> BS Human Relations and Business (35)	<input type="checkbox"/> MBA Project Management (39)
	<input type="checkbox"/> MBA Strategic Leadership (44)
	<input type="checkbox"/> MS Family Studies (45)
	<input type="checkbox"/> MS Human Relations and Business (11)
	<input type="checkbox"/> MS Human Resource Training and Development (46)
	<input type="checkbox"/> MS Managerial Science (47)

X _____
Student's Signature

Date