



OFFICE OF THE REGISTRAR

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OFFICIAL TRANSCRIPT REQUEST

- This request is for paper transcripts only. Electronic transcripts can be requested from our website.
- Please allow 3 to 5 business days for processing. Additional time may be needed during peak periods such as the start/end of a semester and during graduation.
- Official paper transcripts cannot be emailed or faxed. If picking up your transcript, photo ID must be presented.

Last Name _____ First Name _____ MI _____

Named Used When Enrolled at Ramapo College _____

R# _____ OR Social Security # (Last 4 digits) _____

Current Address _____

City _____ State/Province _____ Zip/Postal _____ Country _____

Email _____ Telephone _____

Reason for Request: Graduate School Employment Transfer Other: _____

Select One:

Mail Pick up

Hold for (check all that apply):

Semester Grades:
 Fall (Jan.) Winter (Late Jan.) Spring (May) Summer 1 (July) Summer 2 (Aug.)

Degree Posting (I will be graduating in):
 Fall (January Conferral) Spring (June Conferral) Summer (August Conferral)

Please Mail Transcript to (additional addresses can be included in email along with form):

Number of Copies to this Address: _____ Number of Copies to this Address: _____

Name/Organization _____ Name/Organization _____

Attention _____ Attention _____

Address 1 _____ Address 1 _____

Address 2/Apt _____ Address 2/Apt _____

City _____ City _____

State _____ Zip _____ Country _____ State _____ Zip _____ Country _____

Signature: _____ Date: _____

Please submit completed form to transcript@ramapo.edu

Revised 6/24