LORAS COLLEGE

Official Loras College Transcript Request
For LeadAmerica Participants Only

Please print and complete this form and then return the ***signed*** copy to the Registrar's Office by mail or fax. There is no fee charged to request LeadAmerica transcripts.

Name (*please print legibly*) _____

Signature (*REQUIRED*) _____ **Date** _____

Social Security Number _____**Date of Birth** _____

Email Address *(to contact if questions)* _____

Day Phone Number (*to contact if questions*) _____

Year(s) Participated in LeadAmerica (*please circle*) 2003 2004 2005 2006 2007

Please note: All LeadAmerica transcripts are processed as official transcripts in a self-mailing envelope. **When received, the transcript is official if unopened**. Below please indicate how many official transcripts you would like sent and the addresses they are to be sent to.

Please send _____(number) of transcripts to my current address:

_____

_____

_____

City State Zip

In addition, please send _____(number) of transcripts to:

_____

_____

_____

City State Zip

In addition, please send _____(number) of transcripts to:

_____

_____

_____

City State Zip

Please attach another sheet for additional transcript requests.

Return this form to:
Loras College Registrar's Office
Mail #1
1450 Alta Vista
Dubuque, IA 52001
563.588.4962 (fax) / 563.588.7139 (phone)