

PHILLIPS UNIVERSITY RECORDS  
Official Transcript Request Form

**Mailing Address:**

Phillips Theological Seminary  
**Phillips University Records**  
901 North Mingo Road  
Tulsa, Oklahoma 74116

Phone: (918) 610-8303  
FAX: (918) 610-8404

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ ID# \_\_\_\_\_

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

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Other name(s) you have had \_\_\_\_\_

Years of Attendance (approximate) \_\_\_\_\_

Number of Transcripts Needed \_\_\_\_\_  
X \$5.00 each

Total Cost \$ \_\_\_\_\_ Check enclosed \_\_\_\_\_

Name on Charge Card \_\_\_\_\_

Charge to Visa Card \_\_\_\_\_ expiration date \_\_\_\_\_

Master Card \_\_\_\_\_ expiration date \_\_\_\_\_

Discover Card \_\_\_\_\_ expiration date \_\_\_\_\_

Send to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Student (Required) \_\_\_\_\_ Date: \_\_\_\_\_

If you have an unpaid balance, transcripts will not be issued.  
Please do not E-mail your request. Federal law requires your written SIGNATURE.

Revised 3/7/2007