

Request to Release Official Transcripts Practical Nursing

Louisiana State University Shreveport
College of Education & Human Development
One University Place
Shreveport, LA 71115-2399
Phone: (318) 798-4173
Fax: (318) 797-5350

To request your official **PRACTICAL NURSING TRANSCRIPT**, please print and complete this form. After completing all fields, sign and date the form, then mail or fax the completed form to the LSUS College of Education & Human Development Practical Nursing Program. Official requests are processed as quickly as possible and are usually processed within 5-7 business days of receipt of the request. The first two transcripts are free and \$5.00 (cash or money order) for each one after that. We do not accept checks.

Student Information (Please print name as it appears on LSUS records):

Last, First, Middle

Social Security Number or Student ID

Date of Birth:

Street Address

City, State, Zip Code

() -
Daytime Phone Number

Purpose of Official Transcript Request:

Last semester attended? ____ Fall ____ Spring ____ Summer Year: _____

Please mail my official PRACTICAL NURSING TRANSCRIPTS TO (please print):

**** Official Transcripts will not be issue until all financial obligations to the University are cleared****

Student Signature for Release of Transcript(s)
(Revised 11/2021)

Date