

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