



# ADEP-Adult Degree Evening Program Transcript Request

APPLICANT: Mail this form and transcript  
fee to the Registrar of each College you attended.

To the Registrar \_\_\_\_\_  
*Name of School You Attended*

Please forward a copy of the transcript of

Name \_\_\_\_\_  
*Last Maiden First Middle*

\_\_\_\_\_ *Street City State Zip*

\_\_\_\_\_ *Date of Birth Social Security Number Student Identification Number*

I last attended your school \_\_\_\_\_  
*Term Year*

Signature \_\_\_\_\_

TRANSCRIPT CLERK: Please attach this form to transcript and mail to the following address:

**Adult Degree Program  
California Lutheran University  
60 West Olsen Road #2200  
Thousand Oaks, CA 91360-2700**

APPLICANT: Mail this form and transcript  
fee to the Registrar of each College you attended.

To the Registrar \_\_\_\_\_  
*Name of School You Attended*

Please forward a copy of the transcript of

Name \_\_\_\_\_  
*Last Maiden First Middle*

\_\_\_\_\_ *Street City State Zip*

\_\_\_\_\_ *Date of Birth Social Security Number Student Identification Number*

I last attended your school \_\_\_\_\_  
*Term Year*

Signature \_\_\_\_\_

TRANSCRIPT CLERK: Please attach this form to transcript and mail to the following address:

**Adult Degree Program  
California Lutheran University  
60 West Olsen Road #2200  
Thousand Oaks, CA 91360-2700**