



Office of Transfer Admission

2500 North River Road | Manchester, NH 03106
603.645.9687 | Fax: 603.645.9708

Transcript Release Form

This form is used by Southern New Hampshire University, Office of Transfer Admission for the sole purpose of requesting transcripts on behalf of our prospective students. The prospective student's signature on this form grants Southern New Hampshire University the right to request transcripts directly from Institutions previously attended. If SNHU is unable to obtain transcripts for any reason, the prospective student will be responsible to obtain transcripts.

Please send one (1) official transcript for the following student to:

Southern New Hampshire University
Office of Transfer Admission
2500 North River Road
Manchester, NH 03106

Information of Institution Attended

Name of Institution Attended: _____
Student ID# or SSN: _____
City: _____ State: _____ Zip Code: _____
Month/Year you started: _____ / _____ to Month/Year you stopped attending: _____ / _____
Degree Earned: _____

Student Information

(Legal) First Name: _____
(Legal) Last Name: _____
Date of Birth: _____ / _____ / _____
Any previous last names (if applicable): _____
Current Address: _____
City: _____ State: _____ Zip Code: _____
Email: _____
Phone Number: _____

Student Signature*: _____ Date: _____

*I hereby authorize a faxed or emailed copy of this signature to be used in lieu of the original.

Student must submit signed form by Fax to 603.645.9708, or mail to:

Southern New Hampshire University, Office of Transfer Admission, 2500 North River Road, Manchester, NH 03106

In order to process this request, all fields must be entered completely and the prospective student must have completed an application for admission to Southern New Hampshire University.