

Miami Arts Studio - Transcript Request Form

Name: _____ Student ID# _____
 (First) (Last)

Please indicate method of sending your transcripts by checking off on column below.

- TRANSCRIPTS WILL ONLY BE UPLOADED TO APPLICATIONS LISTED BELOW.
- TRANSCRIPTS WILL NOT BE SENT ELECTRONICALLY TO PRIVATE OR OUT OF STATE INSTITUTIONS.
- YOU ARE RESPONSIBLE TO MAIL YOUR TRANSCRIPTS TO PRIVATE OR OUT-OF-STATE INSTITUTIONS.

Email – Fill in your request at bottom of the page.

(ELECTRONIC TRANSCRIPTS TAKE 3-4 BUSINESS DAYS FOR INSTITUTIONS TO PICK UP.

Date of Student Request	Name of Institution	ComApp	Coalition	SENDedu	Elect.	Hard Copy	Date: Sent	Date: Req.	Date: Pick Up

ELECTRONIC TRANSCRIPT – FLORIDA STATE SCHOOLS ONLY CODES

FIU	UF	FSU	UNF	MDC
00U990	00U975	00U973	00U978	00C930
FGCU	FAMU	BARRY UNV	UM	UCF
730000003255300	730000000148000	730000000146600	730000000153600	730000000395400
USF	FAU	UNF	VALENCIA COLLEGE	
730000000153700	730000000148100	730000000984100	730000000675000	

EMAIL TRANSCRIPTS TO: Write below
