



SPENCER J. COX
Governor

DEIDRE M. HENDERSON
Lieutenant Governor

UTAH DEPARTMENT OF COMMERCE

Division of Consumer Protection

MARGARET W. BUSSE
Executive Director

KATHERINE S. HASS
Division Director

Please contact our office first to confirm if the Division maintains the transcript information before filling out this form. If the records are available, please mail or email the completed form to the address information at the bottom of the page.

The fee for obtaining a transcript is \$30. Please mail in a check payable to the State of Utah, or fill out a Fax Credit Authorization Form by [clicking here](#).

Please do not send any payment details by email.

STUDENT RECORD REQUEST FORM

Name while attending: _____ Date: _____

Name of Closed School: _____

Dates of Enrollment/Graduation Date: _____ Program Enrolled: _____

Campus Location (Address): _____

Phone #: _____

Student's Current Address: _____

Email address: _____

Specify the records that may be disclosed: _____

State the purpose of the disclosure: _____

Please indicate how and where the transcripts will be sent:

Mail the transcript to a third-party

Mail the transcript to the student's current mailing address

Email the transcript to a third-party

Email the transcript to the student's current email address

THIRD-PARTY DETAILS

Name of third-party: _____ Email of third-party: _____

Address: _____

City: _____ State/Country: _____ Zip Code: _____

I expressly give the Utah Division of Consumer Protection permission to send my records to the addressee listed above. Student's signature (this authorizes the release of confidential information.)

VERIFICATION BEFORE PUBLIC NOTARY

STATE OF _____)

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COUNTY OF _____)

On this _____ day of _____, in the year 20____, before me, _____ a notary public, personally appeared

date

month

year

notary public name

_____, proved on the basis of satisfactory evidence to be the person whose name is subscribed

name of document signer

to this instrument, and acknowledged (he/she) executed the same.

My Commission Expires:

(Seal)

(Notary Signature)

Division of Consumer Protection

Heber M. Wells Building • 160 East 300 South • P.O. Box 146704 • Salt Lake City, UT 84114-6704 • www.dcp.utah.gov • Telephone: (801) 530-6601 • Email: consumerprotection@utah.gov • Fax (801) 530-6001