

transcriptrequest

to applicant

Complete the top portion of this form and give it to your college guidance office.

Applicant name

last

first

middle

Applicant mailing address

street/p.o. box

city

state

zip code

High School

Applicant signature

Date

to high school official

The student listed above has submitted an application to the College of Saint Benedict/Saint John's University.

Please send the following items directly to the CSB/SJU Admission Office as soon as possible:

1. Official high school transcript
2. Senior year class/course schedule (if currently enrolled in high school)
3. Official ACT/SAT scores

Send transcript to:

Admission Operation Center
College of Saint Benedict/Saint John's University
37 South College Avenue
St. Joseph, MN 56374

Admission Office contact information:

Phone: (320) 363-2196
Toll Free: (800) 544-1489
Email: admissions@csbsju.edu