

## Third Party Authorization Form

This form can be filled out with Adobe Acrobat and then printed for signatures. Upon completion, this form should be returned to Texas A&M University, Office of the Registrar, P.O. Box 30018, College Station, TX 77842-3018; or Aggie One Stop, General Services Complex, Suite 102. Any questions may be directed to 979-845-1003 or [records@tamu.edu](mailto:records@tamu.edu).

Students/Former students complete this form to authorize a third-party (family, spouse, friend, etc.) to retrieve your academic records. This authorization is valid for one records request only. Please note this is a supplemental form which may need to be submitted in addition to certain Office of the Registrar request forms (ex – [Transcript Request Form](#)). This request may be submitted in person, fax, mail, or email attachment.

### Current or Former Student Information

Full Name as it appears on Student Record	Date of Birth
Universal Identification Number (UIN)	Email Address
Dates of Attendance (Start – End)	Phone Number
Signature	Date

**The individual below is authorized to complete the following transaction(s):**

- |  |  |
|--|--|
| Pickup sealed Official Texas A&M Transcript(s)*: _____<br><small>*Official transcripts are subject to fees. Please refer to TAMU Transcript Request Form for current costs.</small><br>Pickup Sealed Verification<br>Enrollment<br>Enrollment History<br>Degree Verification<br>Test Scores      Type: _____ | Pickup sealed copy of Previous Institution Transcripts<br><br>Name of Institution: _____<br>Pickup Diploma |
|--|--|

**Special Instructions for Documents (ex. – mail, fax, notarization, apostille, other):**

### Person Authorized to Complete this Transaction:

Full Name (Valid Photo Identification must be presented by this person in order to retrieve your records.)	
Phone Number	Relationship

FOR OFFICE USE ONLY	
Date received:	
Processed by:	
Date processed:	