
TRANSCRIPT REQUEST FOR ADMISSION TO UNION COLLEGE

Student:

Fill out this form and give to your school registrar.

Name of Student _____

Address _____

City _____ State _____ Zip Code _____

Date of Birth _____ School ID Number _____

Name of School/College/University _____

City _____ State _____

Dates Attended _____ Graduation Date _____

Signature _____ Date ____/____/____

Registrar:

Please send an official transcript of my academic record including GPA and graduation date if applicable to:

Admissions Office
Union College
3800 South 48th Street
Lincoln, NE 68506

Note for High School Registrars:

Union College grants admission on six semesters. Please include a copy of immunization records.

Steps to Union College

- 1 Application
- 2 Transcripts
- 3 ACT/SAT Test Scores
- 4 Recommendations

MAIL TO:

Admissions Office
Union College
3800 South 48th Street
Lincoln, NE 68506-4386

CONTACT:

www.ucollege.edu
enroll@ucollege.edu
P 800.228.4600
P 402.486.2504
F 402.486.2566

UNION
COLLEGE