CLARK UNIVERSITY
1887
CHALLENGE CONVENTION
CHANGE OUR WORLD™

Transcript Request

Department of International Development, Community, and Environment (IDCE)
Graduate Admissions, Clark University, 950 Main Street, Worcester, MA 01610-1477
IDCE Admissions Office 508-793-7205, IDCE Fax 508-793-8820, IDCE_application@clarku.edu

Program to which you are applying: _____IDSC _____CDP _____GISDE _____ES&P

_____CDP/MBA _____ES&P/MBA

To be filled out by the applicant (Please type or print): If you have attended more than one college or university, undergraduate or graduate, please photocopy this form to obtain the additional number you require. If there are institutions listed on your application from which documents are not available, please so indicate and explain the reasons to the IDCE Admissions Committee.

Applicant name: _____
LAST (Family) First Middle

Mailing Address: _____
NUMBER AND STREET CITY/STATE COUNTY ZIP

Dates of enrollment: From: _____ To: _____
MONTH/YEAR MONTH/YEAR

Degree conferred (if applicable):

_____
MONTH/YEAR

U.S. Social Security Number: _____ - _____ - _____

To: Registrar

Name of College or University: _____

I hereby request that my transcript be sent to:

Clark University
Department of IDCE _____
APPLICANT: FILL IN NAME OF PROGRAM. (ex: IDSC/CDP/ES&P/GISDE/CDP-MBA/ES&P/MBA)

950 Main Street
Worcester, MA 01610-1477

_____
SIGNATURE OF APPLICANT

To be filled out by the Registrar:

Note to the Registrar:
Please provide the information requested below and attach the applicant's transcript to the back of this form.
Check as appropriate:
___ Applicant is currently enrolled
___ Degree conferred
___ Other
Applicant's cumulative grade point average: _____.

If this average is not calculated on a 4.0 scale, please attach an explanation of the grading system.

Applicant's class rank: _____

Please check if rank is not available: _____