



**BALL STATE
UNIVERSITY**

Request for Student Information

Requestor's Name: _____

Requestor's Organization: _____

Student's Name: _____

BSU ID Number: _____

Student's Birth Date: _____

Document Requested:

Transcript

Other: _____

Other information requested: _____

Information provided:

Yes

No

Privacy restriction on record

Date provided: _____

Initials: _____