

# Florida Institute of Technology

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## TRANSCRIPT REQUEST FOR FLORIDA TECH APPLICANTS

Please complete this form and present it to the guidance office at your high school or the registrar at your secondary school or college/university. Be sure to submit this form as soon as possible to complete your application before the appropriate deadline. Have the transcript sent directly to the Florida Tech Office of Undergraduate Admission. Photocopy this form if you have multiple transcripts to send.

Student's Name \_\_\_\_\_  
*Last Name* *First Name* *Middle Initial*

Student's Date of Birth \_\_\_\_\_ Dates of Enrollment \_\_\_\_\_ to \_\_\_\_\_  
*mm/dd/yy* *mm/yy* *mm/yy*

I hereby authorize the release of my academic record to the Office of Undergraduate Admission at Florida Institute of Technology.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Guidance Counselor/Registrar:** The above-named student is applying for admission to Florida Institute of Technology.  
Please enclose this form with an official transcript in a sealed envelope to the following address:

**Florida Institute of Technology ■ Office of Undergraduate Admission**

150 West University Boulevard, Melbourne, FL 32901-6975 ■ ((321) 674-8030 ■ Fax (321) 674-8004  
www.fit.edu ■ admission@fit.edu