

Return this form to The HUB

Students requesting to view their academic record must complete this form prior to gaining access to their records. Documents to which the student has waived access will be removed prior to viewing. Any documents (whiteprints or transcripts) produced specifically for this review will be destroyed within 72 hours of the review.

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E-mail: thehub@andrew.cmu.edu
URL: <http://www.cmu.edu/hub>

Student Information

Student ID Number _____ Date Requested _____

Student Name _____
Last First M.I.

Student Signature _____ Date _____

Explanation of Purpose for Review (to be completed by the student):

Approvals

Date of Review _____

Name of Enrollment Services Records Representative

Signature _____ Date _____