

# Transcript Request Form



## TO THE APPLICANT

Please fill out this section, and then give this entire form to your high school counselor as quickly as possible.

If you have ACT or SAT scores you would like to share, please take a screenshot of your score report (be sure your name is included) and email it to the Associate Vice President for Admissions at [peters@morningside.edu](mailto:peters@morningside.edu). *Test scores are not required for admission purposes but could impact your academic scholarship.*

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LEGAL FIRST NAME

MIDDLE

LEGAL LAST NAME

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PERMANENT ADDRESS

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CITY

STATE

ZIP CODE

## TO THE COUNSELOR

The applicant requests that you promptly mail back this Official Transcript Request, along with his or her official transcript to Morningside University. The transcript can be submitted to us through any of the following ways:

[peters@morningside.edu](mailto:peters@morningside.edu)  
Docufide  
National Transcript Center  
SENDEdu  
E-Script  
Parchment

Mail to: Morningside University  
1501 Morningside Avenue  
Sioux City, IA 51106

Morningside University will consider the applicant's application complete once Official Transcript has been received by our Office of Admissions.

If you have any questions or concerns regarding this form or the application, please call us at 712-274-5511.

The Morningside University experience cultivates a passion for **lifelong learning** and a dedication to **ethical leadership** and **civic responsibility**.