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Student Record Request Form

****Use this form when you would like to request DigiPen Institute of Technology to copy information from your permanent file. e.g., high school transcripts, enrollment agreement forms . Letter of recommendation may not be available for a copy.**

Reason for request of information: _____

Student ID # _____

I, _____, am requesting to have copies made of the following items from my permanent student file.

1. _____
2. _____
3. _____
4. _____

Signature: _____

Email Address: _____

Date: _____

This request may take up to one week.

Should you have any questions, please contact the Registrar's Office.

Admin office use only

- ☐ Check the box if the student waived the right to review the letter of recommendation.