



Reverse Transfer APPLICATION

Return to: Registrar's Office; 1 Murray Campus, Tishomingo, OK, 73460 Phone:(580) 387-7234
Registrar's Fax: 580-387-7239 Email: Registrar@mscok.edu

DIRECTIONS: Please type or legibly print.

IMPORTANT INFORMATION: Contact the Registrar Office at each college you previously attended and request they send an official academic transcript to the Murray State College Registrar Office. Transcripts from all colleges previously attended must be received before a degree may be approved and conferred.

SSN: _____

Student ID: _____

Full-Name (Will appear on diploma and in the admission software exactly as written): _____

First

Middle

Last

List other Names (Maiden, etc.): _____

Complete Address: _____

Diploma and future mailings will be mailed to this address);

Address

City

State

Zip Code

Country

Email Address: _____

Correspondence will be mailed electronically to this address

Day Phone: _____

Cell Phone: _____

List all other colleges or universities previously attended: (It is the student's responsibility to ensure that ALL official transcripts are submitted to the MSC Registrar's Office:

Is there a particular MSC degree you are interested in? If yes, list here: _____

There is no charge to have a degree conferred and transcribed onto your MSC transcript. If a degree is granted, you will be sent an official transcript at the time it is conferred as long as your prior MSC balance is paid in full. If you wish to receive a diploma, there is a \$10 charge. It takes approximately six weeks to order and send a diploma.

Do you wish to receive a diploma?: No (free) _____ Yes (\$10 charge) _____

I understand that graduation is dependent on the completion of all graduation requirements and that completing this form does not guarantee my approval for graduation. I understand that the MSC Registrar Office will notify me if this application is approved or denied. I understand that my student account balance must be cleared and all holds must be removed prior to receiving my transcript.

Please sign: _____

For Office Use Only:

____ Approve Retention GPA _____ Degree Cleared _____ Degree Posted _____ Honors _____

____ Deny Reason for Denial _____ Deficiency Corrected _____

Deficiency Letter Sent _____ Business Office Hold Letter Sent _____ Diploma Mailed _____