

# Sigma Nu Fraternity Awards Program Transcript Request Form

**\*\*THIS FORM IS REQUIRED FOR SCHOLAR OF THE YEAR APPLICANTS ONLY\*\***

*This material will be held in confidence. Official transcripts may be mailed as part of the applicant's materials in a signed, sealed envelope, or sent separately by the institution. Official e-transcripts will also be accepted.*

## To the Transcript Officer:

\_\_\_\_\_ is applying for a Sigma Nu Merit Award.

**(Name of Applicant)**

Please provide the information requested below. This form and official transcript should be sent to Sigma Nu Fraternity, Inc., in **one of the following ways**:

- Provide to requestor to submit directly to Sigma Nu.
- Email to [headquarters@sigmanu.org](mailto:headquarters@sigmanu.org).
- Fax to the attention of Sigma Nu Awards Program at (540) 463-1669.
- Mail hardcopy to:

Sigma Nu Awards Program  
9 N. Lewis Street  
P.O. Box 1869  
Lexington, VA 24450

## Requested information:

- A copy of the applicant's complete academic record (**transcript**) at your institution.
- **Grade Point Average** and **approximate standing in class** (if provided by policy): \_\_\_\_\_
- **Scholastic Aptitude Test scores** and other pertinent test scores (if available and not included in transcript):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**(Signature of appropriate officer)**

\_\_\_\_\_  
**(Date)**

\_\_\_\_\_  
**(Name of Institution)**