



REQUEST to MAIL GRADES for employer tuition REIMBURSEMENT FORM

Submit this form to the Registrar's Office to have your **current** semester's grades mailed for proof of grades received for tuition reimbursement from your employer.

Name: _____ Student ID# _____

Please check: Undergraduate Student Graduate Student Local Phone: _____

Term: _____

Address for Mailing Grades:

Student Signature (required): _____ Date: _____

Please note: A student may access/print/view his/her grades electronically from MyWCU.
Grades are no longer mailed to students.

This form may be faxed to the Office of the Registrar at 610-436-2370 ATTN: GRADES
Requests to FAX grades will not be honored.

Incomplete forms may not be processed.
Return this form to the Office of the Registrar.