



BAPTIST MISSIONARY ASSOCIATION  
THEOLOGICAL SEMINARY  
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## STUDENT RECORDS PRIVACY

Without a signature, current address, phone number, date and social security number this request will **not** be processed.

Lifetime members of the Alumni Association receive transcripts at no charge. All others must pay \$5.00 per transcript, whether official or unofficial. Payment must be made before the request will be processed. **Note: Student with holds on their account will not receive a transcript until all holds are cleared**

Current/Former Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

### I, the undersigned, request:

**Transcripts are mailed to the addresses you provide below.**

1. # of official copies: \_\_\_\_\_ and/or # of unofficial copies: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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2. # of official copies: \_\_\_\_\_ and/or # of unofficial copies: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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3. \_\_\_\_\_ that I be permitted, with proper supervision, to view my education records.

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Additional Comments: \_\_\_\_\_

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Your transcript(s) should be sent within 2 business days. (Additional processing time may be required at the end of each semester or because of unforeseen circumstances.)

Student signature \_\_\_\_\_ Date: \_\_\_\_\_