TRANSCRIPT REQUEST

THIS FORM is for all Resident Students of Marine Corps University

Expeditionary Warfare School Resident Students PRIOR TO AY2019: email EWS at ews@usmcu.edu

EWSDEP and CSCDEP should request an official transcript through MarineNet:
https://www.marinenet.usmc.mil

All other USMC schools: obtain SMART transcript at: https://smart.navy.mil

Student Information:

Last Name: ___________________ First name: ___________________
Other Names used: ______________________________ Contact Number: ____ ____-____

SCHOOL(S) ATTENDED:

☐ Marine Corps War College Year graduated: _____
☐ School of Advanced Warfighting Year graduated: _____
☐ Command and Staff College Year graduated: _____
☐ Expeditionary Warfare School Year graduated: _____

Send Transcript To:

To:   _____________________________________________________________________________
Attn:   _____________________________________________________________________________
Street Address:   ___________________________________________________________________
_________________________________________________________________________________
City: ______________________________ State: ___________________ Zip: _______________

Signature/Date (required):

Submit request:

SCAN form and EMAIL to: mcu_registrar@usmcu.edu
OR
MAIL form to: MARINE CORPS UNIVERSITY
(ATTN: REGISTRAR)
2076 SOUTH STREET
QUANTICO, VA 22134-5067

QUESTIONS: Email: mcu_registrar@usmcu.edu
OR
Call: COMM: (703) 432-5503 or Fax (703) 432-4563; DSN prefix: 278