



ALVERNO COLLEGE
ESTABLISHED 1887

GRADE POINT EQUIVALENCY FORM

Return to:
Registrar's Office
Alverno College
PO Box 343922
Milwaukee, WI 53234-3922
414-382-6370

registrar@alverno.edu
Fax: 414-382-6478
Please call after sending to ensure your request was received

Student ID or SSN: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Signature: _____ **Date:** _____

Current Student Yes No

If not a current student: graduated/date _____ did not graduate _____

Select One:

Mail

Email (email address): _____

Pick up

Mail to: (Leave Blank If Email or Pick Up)

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____