

1. Transcript Request Policy

- In accordance with the Federal Family Educational Rights and Privacy Act (FERPA), a student's information cannot be disclosed without the prior written consent of the student; therefore, requests for transcripts, grades or other information contained in educational records cannot be issued to an outside party without the student's written signature. Telephone, email and unsigned requests cannot be processed.
- All outstanding obligations (financial, academic or administrative) due to the University must be cleared before your transcript request can be processed.
- Typically, official transcripts are sent to graduate schools, employers, and other third party recipients. The Registrar's Office will honor reasonable requests for personal use. Please allow 1-4 working days to process all requests.
- We cannot FAX or E-mail transcripts.

If paying by credit card, fill out:

Credit Card # _

Visa

■ MasterCard

Cash amount enclosed: \$_

Discover

☐ American Express

Expiration date:_

Amount: \$

Month / Year

• Transcripts cost	\$6. If ordering	g more than one on this reque	st form, each ad	ditional transc	ript is \$3.			
2. To ensure	prompt	processing, provid	e all the ir	nformatio	n requeste	ed below:		
Name (print)	ame (print) First Middle			Last			Former Name(s)	
BVU ID #	(and/or SSN – optional)				Daytime phone number			
Current street add	ress, city, sto	te, and zip code (print)				Email		
Currently enro	lled at BVI	J: ☐ Yes ☐ No	If no,	year of las	st attendance	e at BVU:		
☐ Process Now		Process after graduation is p	oosted					
☐ Process after g	rades are po	sted for current semester: 🗖	Fall 🗖 Interim	n 🗖 Spring	☐ Pre-Session	☐ Summer 1 ☐ Summer 2	☐ Term	
	w indicates	that all the information conta ion to send my transcripts to			complete and h	onestly presented. By signing an	nd dating this form, I give	
Signature (required; electronic signature not accepted)					Date			
VU, Office of the R	egistrar, 610		urn this forn itorm Lake, IA 50			ffice r • regoffice@bvu.edu • 712.749	2.2233 • Fax: 712.749.1466	
		Office Use Only	7: Owes:	Amo	ount paid:	U/G/C	Rev. 09/12	
There is an additional the appropriate be	onal charge ox(es) and p	• , ,	es. If a special r			ndicate by checking	versity.)	
_		Transcript fee plus \$35 over		_		al Mail - Transcript fee and cos		