Official Academic Transcript Request

An official SUNY Cortland transcript is the official documented and verified record of your academic history. This includes all courses, grades, and degrees awarded from SUNY Cortland. A request for an official transcript must be made in writing and cannot be processed without your signature.

Transcripts are sent via U.S. Mail. There is no payment required for transcript printing and sending.
Effective beginning in Fall 2008, transcript costs and mailing are paid by the transcript fee portion of the college tuition bill.

Please PRINT clearly and legibly in the fields below to avoid delays in processing and shipping.

Current Name: _____ Cortland ID (C-Number) / SSN: _____
Use SSN only if you do not have a Cortland ID.

Previous Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: (_____)_____ E-Mail Address: _____

NOTE: If your legal name or address has changed, you must also complete our *Personal Data Change Form* to update your record.

Recipient #1 Number of Copies: _____ (Max 10)

Name/Company/Institution

Address

City State Zip/Postal Code

Recipient #2 Number of Copies: _____ (Max 10)

Name/Company/Institution

Address

City State Zip/Postal Code

Recipient #3 Number of Copies: _____ (Max 10)

Name/Company/Institution

Address

City State Zip/Postal Code

Recipient #4 Number of Copies: _____ (Max 10)

Name/Company/Institution

Address

City State Zip/Postal Code

NOTE: If you have additional recipients, please attach a separate sheet listing addresses and names.

Did you attend SUNY Cortland prior to 1985? ☐ Yes ☐ No **Is this a Common Application Request?** ☐ Yes ☐ No

Check All Required Course Levels ☐ Undergraduate ☐ Graduate ☐ Study Abroad

Mailing Instructions: ☐ As Soon as Possible ☐ Hold for Current Semester Grades ☐ Mail After Degree is Posted/Conferred

Expedited Fed Ex Processing: ☐ Ship via Fed Ex
Expedited shipping is available at your expense. You must purchase and fax a Fed Ex pre-paid label to our office for processing. See our web page for instructions.

Authorization: I hereby authorize the release of my SUNY Cortland transcript in accord with the Family Rights and Privacy Act (FERPA: The Buckley Amendment) as amended.

Signature: _____ **Date:** _____

Registrar's Use Only: ☐ Cleared Processed By: _____ Date: _____

MAIL or FAX this form to us: Registrar's Office • Miller 223 • P.O. Box 2000 • Cortland, NY • 13045 • Fax: (607) 753-2959