

Transcript Request

STUDENT INFORMATION

Please note that transcript requests can take up to one week to process. Transcripts may be requested online 24/7 via StudentClearinghouse.org.

| | | | |
|--------------------------|-------------------------|-----------------|--------|
| Last Name: | | First Name: | |
| Student ID: | | Email Address: | |
| Date of Birth: / / | First attended (mo/yy): | Former Name(s): | |
| Street Address | | | |
| City, State: | Zip: | Country: | Phone: |

TYPE AND QUANTITY

Official transcripts bear the Registrar’s signature and seal of the university. They are provided in a sealed envelope and become unofficial if opened.
Cost: \$10.00 for one, additional copies requested on the same form are \$2.00 each.

#_____ Official Transcripts

Unofficial Transcripts are printed on plain paper, bear no seals or signatures, and serve only as unofficial copies of a student’s record.
Cost: Free.

#_____ Unofficial Transcripts

PROCESSING INSTRUCTIONS

For currently enrolled students, would you like us to process this request after (check all that apply):

- ☐ Do not hold (processing will take up to one week).
- ☐ Final grades post (2-3 weeks after the semester ends).
- ☐ Degree is awarded (6-8 weeks after final grades post).

SELECT PAYMENT

Payment must be received prior to processing. Please note: if you have a financial hold, we may be unable to process your request.

- ☐ Pay cash/check/charge card in person
- ☐ Mail with check enclosed
- ☐ Mail with credit card number (Visa, Master Card, and Discover accepted)

Card Number _____ Exp. Date _____ Security Code* _____ Amount to Charge \$ _____

Card Holder Name (Print) _____ Card Holder Signature _____

*Please refer to the back of your credit card for your 3 or 4-digit security code.

DELIVERY METHOD

- ☐ I will pick up my transcript/s at the Office of the Registrar.
- ☐ I authorize the following individual to pick up my transcript/s on my behalf (must bring photo ID): _____
- ☐ Fax (**unofficial transcripts only**) to the following: _____
- ☐ Please mail to the following address/es:

Send ____ copies of my transcripts to:

Send ____ copies of my transcripts to:

Name _____

Name _____

Address _____

Address _____

STUDENT SIGNATURE Physical signatures only; digital signatures are not accepted. Forms without a signature will not be processed.

Signature _____

Date _____