Argosy University, Los Angeles
Admissions Department
5230 Pacific Concourse, Suite 200
Los Angeles, CA 90045
Phone: 310.866.4000 or 866.505.0332
Fax: 310-452-8720

Request for an Official College Transcript

To Registrar: Please mail an official transcript to Argosy University, Los Angeles at the address listed above. In addition, if permitted, please fax an official transcript prior to mailing.

Please Print All Information (*required)

*First Name   Middle Initial   *Last

*Full Name at the Time of Attendance (if different from above)   *Date of Birth (mm-dd-yy)

*SSN   Address

City   State   Zip   Phone
( )

Please check one

◯ I attended classes from (years)   –   ◯ I graduated in (year)

*College/University

*Address

*City   *State   Zip   School Phone
( )

Fax   Cost   (Office Use Only) Payable to:
( ) $

Notes:

To the Prospective Student: I understand that Argosy University, Los Angeles will assist me in securing my official transcript, but that ultimately it is my responsibility to make sure that my Official transcript has been received by Argosy University, Los Angeles.
Conditional Acceptance: If acceptance is granted based upon the review of an unoffical transcript I understand that this acceptance is conditional pending the receipt of an official transcript. If an official transcript is not received by the end of my first session (for a 7.5-week class) or semester (for a 15-week class) of enrollment I understand that I will be withdrawn from Argosy University, Los Angeles per the policy in the *Argosy University Academic Catalog*. I am aware that financial aid will not be credited to my account until an official transcript is received.

Acceptance of policy stated above

Signature   Date

I authorize you to release my official transcript to Argosy University, Los Angeles

Signature   Date

For official use