



# Request for Academic Transcript, Duplicate Diploma or Other Records

**Instructions:** Complete this form with all applicable information. **Fee payment and student signature** are both required at the time of ordering. If you have any type of hold on your records, only an unofficial transcript will be issued. Please note: transcripts cannot be ordered without a picture ID or written and signed authorization.

**\$ 5.00** per sealed/official academic transcript      **\$ 2.00** per page, unofficial student file copies (Max per file \$20)  
**\$ 2.00** per unofficial academic transcript      **\$ 5.00** per page, sealed/official student file copies (Max per file \$50)  
**\$15.00** per sealed/official duplicate diploma      (*Maximum charge per file excludes transcripts, diplomas & test scores*)  
**\$15.00** per sealed/official Entrance Test Score letter  
**There is no charge for official academic transcripts provided directly to other academic institutions.**

**Please enclose a check or money order for the proper amount; cash is accepted for in-person requests only. DO NOT MAIL CASH.** Please note that in order to process your request, you must be in good standing both academically and financially with all obligations associated with your tenure at this college. This amount will be returned if we are unable to fulfill your request.

Please allow 14 days for processing.

**Student Information: (please print)**

LAST NAME		FIRST NAME		MI	SOCIAL SECURITY NUMBER - -
STREET ADDRESS					DATE OF BIRTH / /
CITY	STATE	ZIP	PHONE # ( ) -	E-MAIL ADDRESS (optional)	
FULL NAME DURING ENROLLMENT			DATES ENROLLED From _____ To _____		CAMPUS LOCATION

**Please check at least one:**

- Academic Transcript - Official w/ Seal
- Transcript – Unofficial / NO SEAL
- Photocopy of Diploma – Unofficial / NO SEAL
- Other Records \_\_\_\_\_
- Duplicate Diploma – Replacement

**No. Of Copies**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Special Instructions:**

- Hold for Pick Up (*we will notify you at the above contact number when processed*)
  - Mail (*indicate to whom below*)
  - Email (*indicate to whom below*)
  - Fax to: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_
- Attention: \_\_\_\_\_

**Addresses for Mailed Transcripts:** \*Emailed transcripts may be recognized by the receiving institution as official\*

**Please send \_\_\_\_\_ official transcript(s) to the following address/email:**

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attn:** \_\_\_\_\_

**Attn:** \_\_\_\_\_

**STUDENT SIGNATURE: (required)** \_\_\_\_\_ **DATE:** \_\_\_\_\_

In accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974, your signature is required to authorize the release of your school records.

<b>For Office Use Only:</b>	Pickup / Mailed / Faxed	Processed by: _____	Date: _____
<b>Payment:</b>	Amount: \$ _____	Received by (staff initials) _____	Payment Type: Cash / Check / M.O. Date: _____
<b>Financial:</b> _____ Good Standing - Please process _____ DO NOT PROCESS! Return funds and have student contact college.			
Reason: _____			
Signature of College Official: _____ Date: _____			