REQUEST FOR TRANSCRIPT

Signature of Student/Graduate:_______________________________

Student’s/Graduate’s Name:_________________________________(Printed)

No. & Street:_____________________________________________

City, State & Zip Code:_____________________________________

Email Address or Phone Number: ____________________________

Currently Enrolled:  YES___    NO___    Date of Request:_______

Year of Graduation:___________

(Please select from the following choices)

____Official Transcript: $6.00
____Unofficial Transcript: $6.00
____Unofficial Transcript - Faxed to Recipient: $8.00
____Official/Unofficial Transcript & NBOME Scores: $10.00
____Official/Unofficial Transcript & NBOME Scores - Faxed to Recipient: $10.00
____NBOME Scores Only (Level 1 and/or Level 2): $5.00
____NBOME Scores Only (Level 1 and/or Level 2) - Faxed to Recipient: $5.00
____Diploma Copy: $6.00
____Diploma Copy - Faxed to Recipient: $6.00
____Special Delivery/Overnight Delivery (Plus regular fees as appropriate): $20.00
____Replacement Diploma $30.00

This request must be signed and the name printed below the signature. Also, all incomplete requests will be returned to the student/graduate for completion (example: no payment, no signature, lack of complete address).

1.________________________________________  4.________________________________________
   _________________________________________  _________________________________________
   _________________________________________  _________________________________________

2.________________________________________  5.________________________________________
   _________________________________________  _________________________________________
   _________________________________________  _________________________________________

3.________________________________________  6.________________________________________
   _________________________________________  _________________________________________
   _________________________________________  _________________________________________

9/13/12

CREDIT CARD INFORMATION

VISA®  MasterCard®  American Express®  ONLY

Name on Card:__________________________________________

Card Type:_____________________________________________

Account Number:_______________________________________

Expiration Date:_______________________________________

All transcripts will include GPA & Numerical Class Rank