

Arizona State University

REQUEST FOR OFFICIAL TRANSCRIPT

University Registrar Services

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8	http://studer	<u>nts.asu.edu/tra</u>	<u>nscripts</u>	
Name (Last, First MI)		Former Na	Former Name(s), if any:	
Address (Number, Street, Apt.)		City, Stat	City, State, Zip	
Daytime Phone Number	ASU ID Number	Date of Bi	Date of Birth	
Dates of Attendance (Sem/Year)		☐ THUNDERBIRD/ASU STUDENT -Began coursework at Thunderbird prior to 12-31-14 but continued degree requirements at ASU.		
Email Address		IMPORTANT NOTE: Eligible students can order electronic copies of official transcripts through the online ordering system. See the transcript webpage for details.		
Release Immediately (If you are currently enrolled, your transcript will be released with only the grades that are posted at this time.) Hold for all my grades (check one): ☐ Fall, ☐ Spring, ☐ Winter Session, ☐ Summer I, ☐ Summer II, ☐ 8-week summer Hold for my current degree (check one): ☐ Bachelors, ☐ Masters, ☐ Doctorate (Degrees could take up to 6 weeks to post after graduation.) SPECIAL HOLD REQUEST: (Will hold for maximum of 60 days) ☐ Change of Grade, ☐ Repeated course or specific grade change post, ☐ Incomplete, Specify course(s)				
DESTINATION: Rush, requested in person same day pick up Will pick up at (check one) (Do not fill in the name/address area below if you are requesting a pick up.): Tempe (next working day), West Polytechnic Downtown (West, Polytechnic and Downtown allow 4 business days) (Transcripts will be held for 30 days only.) OR Mail to address(es) shown below (See #3 below). To add more requests, please attach a list to this form. NOTE: If requesting special delivery, Standard FedEx does not deliver to P. O. boxes; a FedEx deliverable street address is required. Please print name, title, and address of person(s) or institution(s) to whom you wish transcript(s) sent:				
First person or institution: Name:			Attn:	
Name.				
Address:			City State Zip	
☐ Special Instructions:			Number of Copies:	
Second person or institution: Name: Attn:				
Address:			City State Zip	
Special Instructions:			Number of Copies:	
TOTAL NO. OF COPIES See Fee Payment policy #1 below				
STUDENT'S SIGNATURE (required) DATE				
money order payable to Arizona Statranscript will be \$15 per copy. "Ru of the transcript. Expedited delivery via Standard FedEx or U. S. Expres FedEx International Priority or International FedEx deliverable street a subject to change without notice. Transcripts will be sent out usually delay. Transcripts to be picked up b All requests must be authorized by the persons other than the student will run Official copies of work transferred to	ate University. If ordering in person, paush" transcripts (requested in person, to costs are in addition to the cost of the s Mail service at \$22.00 per U. S. delivernational Express Mail at \$38.00 per in ddress is required. Also note that there in 1-2 business days, in the order that repy the student will be held for no longer the student's signature in accordance who to Arizona State University must be received.	ayment of cash, of be printed and transcript(s). Expery address. Externational delimination and transcript and additional requests are record than 30 days. It with the federal fritten authorizate quested directly	due the University. When ordering by mail, attach check or check or credit card is acceptable. The fee for an official picked up on the same day) cost \$10 in addition to the total cost expedited delivery processing, instead of regular mail, is available expedited deliveries to addresses outside the U. S. are available via very address. Please note that FedEx will not deliver to a PO Box; I fee assessed by FedEx for all returned shipments. Fees are excepted. However, during and after final exams there may be some Picture identification will be required to pick up transcripts. Family Educational Rights and Privacy Act of 1974. Requests by ion. from the institution where the work was completed. In to 90 days after your order date. After 90 days, you must place	

INTERNAL USE ONLY- SBS: HOLD ______RECEIPT #_____TELLER_____DATE_____

___AMT___