Office of the Registrar, University of NorthWest
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TRANSCRIPT REQUEST FORM

Fees are payable by check (payable to University of NorthWest) or credit cards (online) at the Office of Registrar. Regular service $50.00 (3-5 business days), $25.00 for each additional copy (s) ordered at the same time.
Please note: **OFFICIAL TRANSCRIPTS CANNOT BE ISSUED WITHOUT THIS FORM.**

Legal Name _____ **Reg. No.** _____
(Last, First, Middle)

Current Mailing Address

_____

_____
City *State* *Zip*

_____
Daytime Phone Number *Email* *Date*

RELEASE TRANSCRIPT:

- ❑ As Currently Recorded
- ❑ After Degree is Recorded
- ❑ Other _____

REASON FOR THIS REQUEST:

- ❑ Summer School
- ❑ Employment
- ❑ Transfer
- ❑ Scholarship
- ❑ Other _____

Comments:

_____

I hereby consent to have my transcript released to the address indicated below:

_____
Signature of Student *Date*

****

Please use the space below to print the name and address of place(s) transcript is being sent to. Use reverse side of this sheet if more space is needed. Fill out a mailing label for each transcript.

_____
_____
_____

For Office Use Only
Amount: _____ Receipt #: _____
Date Received: _____ Clearance: _____