# TRANSCRIPT REQUEST

**Please note:** All requests are cleared through Student Financial Services. No transcript is released if there is a delinquent student account or loan balance. You will be notified and your request will be made void after 14 business days if your account is not cleared or there is missing information.
**Please allow 7 business days for processing & shipping.**

## Student Information

Name: _____
First Middle Last Maiden/Previous Name (if applicable)

Address: _____
Street City State Zip

Social Security Number: _____ Student ID: _____

E-mail: _____ Degree Program(s): _____

Primary Phone: _____ Campus: _____

Date of Birth: _____ Did you attend prior to 1990? _____

## Transcript Request

Number of Copies: _____

Options:
- □ Unofficial transcript (No charge)
- □ Official transcript ($5.00 each)

Please send transcript:
- □ Now
- □ Hold for Current Semester Grades
- □ Hold for Current Degree Posting
  Degrees are posted 4 to 6 weeks after program completion.

Service:
- □ Pick up from Trinity Central
- □ USPS
- □ FedEx ($30.00 per destination)
  Arrives by noon the day after it is sent & cannot be sent to a PO Box. Additional fees apply for international destinations.

## Destination Information

| | | (Additional destination, if applicable) |
|---|---|---|
| Institution/Company | _____ | _____ |
| Attn: Office or Individual | _____ | _____ |
| Street Address | _____ | _____ |
| City, State Zip | _____ | _____ |
| Destination Phone Number | _____ | _____ |

## Payment Information

Please make check or money order payable to Trinity International University.

If paying by credit card: □ Visa □ MasterCard □ Discover CVC # (on back of card): _____

Name on Card: _____ Card Number: _____

Expiration Date: _____ Billing Address: _____

**Signature**: _____ **Date**: _____

In compliance with FERPA federal law, this form must be signed by the student for the request to be processed.
**Note:** For your protection, we recommend that you do not mail cash payments.

## For Office Use Only

Total Due: $ ____
□ Payment received
□ $ □ ✓ □ 💳

Request received: _____ by _____
Receipt e-mailed: _____ by _____
□ Payment processed
Request completed: _____ by _____
Confirmation e-mailed: _____ by _____

**Trinity International University • Attn: Academic Records • 2065 Half Day Road, Deerfield, Illinois 60015**
**Phone (847) 317-4200 • Fax (847) 317-7040 • transcript@tiu.edu**