



Registrar's Office
20601 West Paoli Lane
P.O. Box 486
Weimar, CA 95736
Phone: 530.422.7923
Fax: 530.422.7949

Transcript Request Form

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_
Last First Middle Maiden

Current Address: \_\_\_\_\_ Email Address: \_\_\_\_\_
Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Signature: \_\_\_\_\_

Status: [ ] Alumni [ ] Former Student [ ] Current Student ( [ ] Wait until current-term grades are posted.)

Delivery Method:

[ ] MAILING OPTION

Number of Copies \_\_\_\_\_

Type Option: [ ] Official [ ] Unofficial

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

Address: \_\_\_\_\_

[ ] PICK-UP OPTION (Photo ID required)

Number of Copies \_\_\_\_\_

Type Option: [ ] Official [ ] Unofficial

[ ] EMAIL OPTION [ ] FAX OPTION
Number of Copies \_\_\_\_\_ Number of Copies \_\_\_\_\_
(Unofficial Only) (Unofficial Only)

Email Address: \_\_\_\_\_ Fax to the Attention of: \_\_\_\_\_
Fax #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Country: \_\_\_\_\_

Transcript Fee: \$10.00 per transcript (both domestic and international). \*Email and fax options are free of charge.

Table with 3 columns: Processing Time, Delivery Time (Domestic/International), and Total Charge. Includes options for 24-hour processing and express shipping.

Payment Method: [ ] Cash (Please do not send cash by mail.) [ ] Check [ ] Credit Card
(If credit card is the method of payment, we will contact you by phone to receive credit card information.)

NOTE: We cannot release your transcript(s) if your school bill is not paid off.

Office Use Only Date Received: \_\_\_\_\_ Financially Clear: \_\_\_\_\_ Date Sent: \_\_\_\_\_

Electronic Record [ ]