

**PLEASE PRINT OR TYPE INFORMATION (COMPLETE ALL BOXES)**

**STUDENT INFORMATION:**

Name \_\_\_\_\_ Address \_\_\_\_\_

Maiden (or other names used) \_\_\_\_\_

Student ID Number \_\_\_\_\_ Phone # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Dates Attended: From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_

(By signing, I certify that I am the above student requesting my NCSU transcript)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE SEND TRANSCRIPTS TO THE FOLLOWING ADDRESS(ES):**

*Each faxed transcript requires an additional \$5 fee. Please provide fax number and contact person's name below.*

Number of copies _____	
Number of copies _____	
Number of copies _____	

<u>Cost Schedule</u>	
# of Transcripts	Cost
1	\$10
2	\$20
3	\$25
4	\$30
5	\$35
6	\$40
7	\$45
8	\$50
9	\$55
10	\$60
continuing in \$5 increments	

SEND TRANSCRIPT(s):    NOW     HOLD FOR GRADE     HOLD FOR POSTING OF DEGREE

**CHECK ONE ONLY:**

Enclosed please find \$  (The first and second transcript cost \$10 each. Each additional transcript cost \$5. See Cost Schedule above). A check or money order is made out to "NCSU" for the full amount.

You may bill the fee to my VISA or MASTERCARD credit card. If you are faxing this request to Registration and Records, a credit card number MUST be provided!

Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration date \_\_\_\_\_ / \_\_\_\_\_

Please allow at least 24 hours during term and three days at the end of term for your request to be filled. All fees are non-refundable. Transcripts will not be issued to students indebted to the University. Fees cannot be billed to the student; payment must be made with the request. There is a \$5 fee for each faxed transcript.