TRANSCRIPT REQUEST

NSHE ID: __________________________________________ Phone Number: ( )____________________________________

Student Legal Name: __________________________________________ E-mail: __________________________________________

Student Signature: __________________________________________ Date: __________________________

This form is intended for use by students requesting an official transcript.

- Transcripts are not issued unless all financial obligations to the college are fulfilled
- Photo identification is required with all transcript requests and pick ups
- A separate form is required for each processing time and/or delivery option
- A payment is required prior to transcripts being processed
- Transcript fees are non-refundable

Please choose your processing option below:

1. **Regular Processing**: $3 fee per copy  Number of copies: __________
   - 2-3 business days
   - After all current semester grades are posted
   - After degree is posted (expected graduation date: _____________________)
   - After change of grade (specify course: _____________________)

2. **Rush Processing**: $5 fee per copy  Number of copies: __________
   - Same business day

3. **Delivery Option**:
   - Pick up at Registrar’s Office
   - FedEx expedited mailing: additional $25 fee added to regular or rush processing
     *Please note, FedEx does not ship to P.O. Boxes
   - Standard mailing
     Send to: __________________________
              __________________________
              __________________________

4. **Total Fees**:
   Number of copies x Processing Option + Optional FedEx = __________

OFFICE OF THE REGISTRAR USE ONLY
ID Verified by: __________________ Date: __________________

OFFICE OF CASHIERS USE ONLY
Receipt: __________________ Processed by: __________________ Date: __________________