



TRANSCRIPT REQUEST FORM

This form is for use only by those who DO NOT have both a major credit card and a valid email address. If you have both of these, please order your transcript online. All past debts to the college must be paid before transcripts can be released.

Your Personal Information				*Incomplete or illegible forms may delay processing			
Full/Legal Name							
Last		First		Middle		Maiden/Former	
Student ID # or SSN				Date of Birth			
				mm/dd/yyyy			
Daytime Phone #		()		Email Address			
Approximate Last Date of Enrollment:		Fall 2003 to Current		Fall 1982 to Summer 2003		Prior to Fall 1982	

Your Order			
Send	<input type="text"/>	OFFICIAL transcripts to the following recipient/address	<input type="text"/>
	# of copies		# of copies
Recipient			
Street			
City		State	Zip Code
			Country, if not USA

Special Handling	
<input type="checkbox"/>	Hold transcript until current term grades are posted
<input type="checkbox"/>	Hold transcript request until degree is posted after _____ term.
	Semester Year

Processing Options	Check or money order should be made payable to Mayville State University. Transcript charges are due upon receipt of request.														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> <input type="text"/> X \$7.25 + \$0.00 = <input type="text"/> <small># of Transcripts Ordered your total charge</small> </td> <td style="width: 50%; padding: 5px;"> US Mail. Transcript will be sent to requested recipient via US mail within 3-5 business days of receipt of order. </td> </tr> <tr> <td style="padding: 5px;"> <input type="text"/> X \$7.25 + \$0.00 = <input type="text"/> <small># of Transcripts Ordered your total charge</small> </td> <td style="padding: 5px;"> Electronic Exchange. Transcript will be sent via National Student Clearinghouse Electronic Transcript Exchange within 3-5 business days of receipt of order. 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The Secure Email PDF option is available by placing an order through the National Student Clearinghouse at www.mayvillestate.edu/transcripts.

Consent

I understand my request will not be processed without the correct payment accompanying the request. By signing this form, I am giving consent to Mayville State University to release my transcript to the recipient above. A typed signature is considered an official signature.

Student Signature: _____ Date: _____

To Electronically Submit this form- please save this form to your computer, then attach the form to an email to records@mayvillestate.edu
 Mail this form and required charges to- Mayville State University, Office of Academic Records, 330 3rd St. NE, Mayville, ND 58257, Fax- 701-788-4738

OFFICE USE ONLY: On in house reconciliation report _____ How was the transcript sent _____ Date sent _____ Your Initials _____