



# REQUEST FOR ACADEMIC TRANSCRIPT

Student ID or last 4 SSN \_\_\_\_\_ Date of birth \_\_\_\_\_  
 Name \_\_\_\_\_ Former name \_\_\_\_\_  
 Address \_\_\_\_\_ Daytime phone no. \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_ Dates of attendance \_\_\_\_\_ to \_\_\_\_\_  
 Email ID (For notifications only) \_\_\_\_\_

<b>Number of transcript(s) requested:</b> <input type="checkbox"/> Official transcript <input type="checkbox"/> Unofficial transcript _____ <input type="checkbox"/> Mail <input type="checkbox"/> Available for pick-up <b>(PHOTO ID REQUIRED)</b>	<b>Please check all that apply:</b> <input type="checkbox"/> Now as record stands <input type="checkbox"/> After semester grades are posted <input type="checkbox"/> After degree is posted <input type="checkbox"/> After certification is posted
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Mail transcript(s) to:

1. \_\_\_\_\_ 2. \_\_\_\_\_  
 Attn: \_\_\_\_\_ Attn: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Currently, the University does not charge for transcripts. Transcripts are typically processed within 5-7 business days from the receipt of the request. Transcripts requested at the end of a semester/final grades posted or when certification is finalized would be sent once that specific process is completed. Transcripts are **NOT released** if the student still has an outstanding balance on their Notre Dame account. Notification to the student of any "holds" would be made at the time the transcript request is received.*

*Current students (or those with active WebAdvisor accounts) may request transcripts and check the status of their request by accessing their personal WebAdvisor account.*

*If there are any questions about the transcript request, the timing/distribution of the transcript or general processing questions, please contact the registrar's office at 410-532-5327 or registrar@ndm.edu.*

**I am unable to pick up my transcript(s) personally. I give permission for \_\_\_\_\_ to pick up my transcript(s). (PHOTO ID REQUIRED)**

I authorize the release of my transcript(s) to the recipient indicated above for the Federal Family Educational Rights and Privacy Act (Public Law 93:380) I understand that my transcript(s) will not be released if I have an outstanding debt to the University.

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

FOR OFFICE USE ONLY: Date received _____ Business hold: Y N
Division _____ Date released _____ Initials _____
Contact Information: Date of contact _____ Comments _____
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