



TRANSCRIPT REQUEST FORM

- Official transcripts \$5.00 each/unofficials no cost..\$5.00 fee includes processing and mailing via US Domestic mail.
To send transcript(s) Federal Express for US Domestic is \$19.00 + \$5.00 per official transcript.
To send transcript(s) Federal Express for International is \$30.00 + \$5.00 per official transcript.
A written request including actual signature is required for all transcripts which can be faxed, mailed or sent via email.
Official transcripts can only be picked up or mailed / unofficials transcripts can be picked up, faxed, mailed or emailed.
Processing time for official transcripts are 1-5 days, depending upon peak periods, check schedule for grade due dates
All information below must be filled out to process request. If your account is on HOLD, or your payment is not enclosed, this form is illegible, your request will be returned to you unprocessed.
Mail Request to: Pacific Lutheran University or fax to: 253.538.2545 Questions: 253.535.7133 or email: hodgeel@plu.edu

PRINT LEGIBLY

Student Name: Student ID# or SSN#:
Former Name(s): Date of Birth:
Address: Last Date Attended:
Daytime Phone:
Email Address:
Today's Date:

REQUIRED SIGNATURE:

Number of Official Transcript(s) needed: Number of Unofficial Transcript(s) needed:
Are you transferring to another school?
If you are transferring you are required to submit a Withdrawal Form with the Student Services Center.
Why are you leaving PLU?
Do you need a transcript for a scholarship?

Check all that apply:

- Process transcript(s) immediately: Pick up Mail (fill in address below)
Process after grades are posted for: Summer Fall J-Term Spring
Process after degree posted (degrees posted approximately 2-6 weeks after graduation)
Month you are graduating: May August December January
Process after grade change: (specify below)

Course Title: Course Request Number (CRN):
Mail to:
Use the back of this form for any additional mailing addresses

PAYMENT INFORMATION

Payment by cash, check, money order (made out to PLU) or VISA/MasterCard/Discover. (Do not mail cash.) Payment must be paid with your request.

Amount Enclosed: \$ Cash (in person) Check Money Order
Credit Card Payment: VISA MasterCard Discover Payment \$
Card Number: Expiration Date:
Name exactly as it appears on your credit card:

Signature: Today's Date:
OFFICE USE: HOLD NO HOLD Initials Returned (Attached)