



# TRANSCRIPT REQUEST

5520 108<sup>th</sup> Avenue NE

P.O. Box 579 Kirkland, WA 98083

(425) 889-5228 • fax: (425) 889-5743 • [eagle.northwestu.edu/registrar](http://eagle.northwestu.edu/registrar)

## Personal Information

Name (Include Prior/Maiden Names) \_\_\_\_\_

ID # \_\_\_\_\_ SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Current Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Currently Enrolled at Northwest?  YES  NO Last Enrolled at NU: Semester / Year \_\_\_\_\_/\_\_\_\_\_

Enrolled as:  Undergraduate Student (Bachelor's Degree)  Graduate Student (MBA, MA, MIT)

Signature \_\_\_\_\_ (Required to release transcript)

## Send Request To:

Number of Copies Requested To This Address \_\_\_\_\_

Pick Up

Fax (faxed copies are not official) Fax Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Attn \_\_\_\_\_

Mail To:

Institution \_\_\_\_\_

Attention \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Send Additional Request To:

Number of Copies Requested To This Address \_\_\_\_\_

Pick Up

Fax (faxed copies are not official) Fax Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Attn \_\_\_\_\_

Mail To:

Institution \_\_\_\_\_

Attention \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Please Note

- Transcripts are not issued until all **financial accounts** are paid.
- Processing time is **3-5 working days**.
- Transcripts include only the academic records for semesters completed at Northwest University – records for coursework completed at other institutions must be requested from each individual institution.
- Undergraduate and Graduate transcripts are separate and must be requested separately.

## For Office Use Only

### Approved for Release

Fee Paid ..... (\_\_\_\_\_)

Accounting ..... (\_\_\_\_\_)

Perkins Loan..... (\_\_\_\_\_)

Date Sent ..... (\_\_\_\_\_)

## Payment Information / \$2.00 per Transcript

Select One:  Cash \$ \_\_\_\_\_  Check \$ \_\_\_\_\_  Credit Card \$ \_\_\_\_\_

### Credit Card Info:

Name as it appears on credit card: \_\_\_\_\_ Zip Code for Billing Address: \_\_\_\_\_

Visa  MasterCard  Discover Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_