

# North Dakota State University Official 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 at [www.getmytranscript.com](http://www.getmytranscript.com).

Full/Legal Name: \_\_\_\_\_  
Last First Middle Maiden/Former Name(s)

Student ID # (or SSN): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
mm/dd/yyyy

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Approximate Last Date of Enrollment:  Current-Fall 2002  Summer 2002-Fall 1982  Prior to 1982

Send \_\_\_\_\_ transcript(s) to me at the following address:  
(No. of copies)

Current Mailing Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Country, if not USA

Send \_\_\_\_\_ transcript(s) to the following recipient/address:  
(No. of copies)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Special Handling:**

- Hold transcript request until current term grades are posted  
 Hold transcript request until degree is posted after \_\_\_\_\_ (semester/year) term  
 Place transcript for student pickup in a signed/sealed envelope

### **Delivery/Payment Options** (see explanations on [Transcript Instructions and Ordering Options Page](#)):

- Hold for Pickup = \$5/transcript  Fax/Mail = \$5/transcript + \$10 surcharge/order  
 Regular Mail = \$5/transcript  Same Day Pickup = \$5/transcript + \$10 surcharge/order  
 Express Mail (US/Canada) = \$5/transcript + \$20 surcharge/order  
 Global Express Mail = \$5/transcript + \$30 surcharge/order

Charges: \$5 per copy x \_\_\_\_\_ copies + \$\_\_\_\_\_ special delivery surcharge (if applicable) = **Total \$** \_\_\_\_\_

Please enclose a check or money order made payable to NDSU for the total amount, or provide credit card information below. The appropriate amount will be charged to your credit card upon completion of your order.

### **Check One:**

Check or Money Order is enclosed for above amount (do not mail cash).  Visa  MC  Other, Indicate \_\_\_\_\_  
Credit Card # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Exp. Date \_\_\_\_\_ V-Code \_\_\_\_\_  
Cardholder Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Cardholder Address \_\_\_\_\_

Send payment and this form to: **NDSU Office of Registration & Records**  
**P.O. Box 5196 / 110 Ceres Hall**  
**Fargo ND 58105-5196**  
**Fax: 701-231-8959** (fax requests must include credit card payment information)

*I understand that my request will not be processed without payment. Illegible printing or invalid credit card information will delay or stop the processing of a transcript request.*

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

**Office Use Area** Date paid \_\_\_\_\_ Received by \_\_\_\_\_ Receipt number \_\_\_\_\_  
 Check (number \_\_\_\_\_)  Money order (number \_\_\_\_\_)  CC processed \_\_\_\_\_  
 Sent \_\_\_\_\_  Logged \_\_\_\_\_