



Transcript Request Form

Current Name: _____
First Middle Last

Name(s) when enrolled (if different from above): _____

Student ID*: _____ Date of Birth: _____

*If you do not know your Student ID, you will be asked to verify SSN when calling to provide payment.

Current address: _____
Street City State Zip Code

Phone number and/or email: _____

Reason for Request (Please Circle):

Summer/Concurrent Enrollment Transfer Employment Licensure/Certification Grad School Scholarship Application Personal Use Other: _____

Signature: _____ Date: _____

Request cannot be processed without a written signature

- Mailed, emailed, or available for pick-up in the Registrar's Office within 2 business days – \$7.00 per copy
- Same day processing or immediate pick-up - \$7.00 per copy + \$8.00 expedited charge
- Fed Ex Overnight - \$7.00 per copy + \$40 FedEx shipping charge (additional charges possible for international shipments, you will be notified before charged) – Fed Ex orders must be received by 12:00 p.m. CST

Number of Copies: _____

Number of Copies: _____

Send: Now After Grades Posted After Degree Posted

Send: Now After Grades Posted After Degree Posted

Send to: _____

Send to: _____

Number of Copies: _____

Number of Copies: _____

Send: Now After Grades Posted After Degree Posted

Send: Now After Grades Posted After Degree Posted

Send to: _____

Send to: _____

If you are submitting the form via email or fax, please call our office at (309) 677-3375 to provide SSN and payment once you have submitted the form.

- Credit Card Payment \$ _____
- Check enclosed \$ _____ (Please make checks payable to Bradley University)

Email: registrar@bradley.edu
Fax: (309) 677-2715

OFFICE OF THE REGISTRAR