

# Transcript Request Form



Registrar's Office  
62 York Street, Sackville, NB  
Canada, E4L 1E2  
(506) 364-2269 (phone)  
(506) 364-2272 (fax)

<b>Last Name</b>	<b>First /Preferred Name</b>	<b>Middle Name</b>	<b>Phone Number</b> ( )	<b>E-mail Address</b>	<b>Student ID #</b>
<b>Current Mailing Address</b> (Number / Street / PO Box)		<b>Town/City</b>	<b>Province</b>	<b>Postal Code</b>	<b>MTA Unit #</b>

**Please complete a separate form for each mailing address.**

1. Transcripts will not be issued until all past due financial obligations to the university have been cleared.
2. Student records are confidential; transcripts are issued only upon the written request of the student. Third party requests will not be accepted.
3. Transcript Processing Fee must be submitted with the request.
4. **Basic Service Fee:** \$5.00 per transcript (includes regular mailing)
5. **Fax Service:** additional \$5.00 per transcript (faxed transcripts are unofficial and are generally not accepted by other academic institutions)
6. **International Fax Service:** additional \$10.00 per transcript.
7. **Rush/Priority Processing:** additional \$10.00 per request  
**Note rush/priority processing: This service may not be available for the first two or last two weeks of each term.**
8. **Courier Service:** additional \$10.00 per request (within Canada only), an additional \$25.00 per request within North America, an additional \$35.00 per request worldwide. **Receiver's phone # and complete street address required below.**

**Years of Attendance** \_\_\_\_\_

**When required:**  Now  After Fall Term Grades  After Winter Term Grades  After Spring Term Grades

**Type:**  Official  Unofficial **Number of Copies:** \_\_\_\_\_

**Transcripts to be:**  Picked up  Mailed to address below  Faxed to number below  
 Rush/Priority Processing  Courier (receiver's phone # and street address required below)

Name: \_\_\_\_\_ Fax # \_\_\_\_\_

**Credit Card #** \_\_\_\_\_ **Expiry Date** \_\_\_\_\_ **Credit Card Signature** \_\_\_\_\_

Student Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

Transcript mailing address , or courier (receiver's phone # and street address): **Please print.**

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FOR OFFICE USE ONLY			
Basic Fee		\$5.00	
Fax Service		\$5.00	
International Fax Service		\$10.00	
Rush/Priority Processing		\$10.00	
Courier		\$10/\$25/\$35	
Staff Initials			
<b>TOTAL</b>			

Method of Payment:  Cheque  Cash  
 Credit Card  Debit Card