

# SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

## TRANSCRIPT REQUEST

Your Name	
Your Street Address	
Your City, State, and Zip Code	
Your Daytime Telephone Number and E-Mail Address	
Your Student Identification Number (If not provided may delay processing)	Date of Birth

**TRANSCRIPT FEE IS \$5.00 PER TRANSCRIPT.**

Please allow a minimum of 5 working days for processing.

- ▶ The transcript fee should be paid at the Bursar's Office. Financial obligations to the University must be paid at the Bursar's Office before transcripts can be issued.
- ▶ Request will not be honored unless all required information on this form is completed.
- ▶ Transcripts issued to student will bear the notation "Issued to Student".
- ▶ If multiple transcripts are requested to be sent to the student, they will be issued in one envelope unless you indicate in the Instructions for Processing Transcript – Special Instructions section that you wish to have the transcripts issued in individually sealed envelopes.
- ▶ If you submit your transcript request by fax, you should submit payment by check or money Order payable to SIUE to the Office of the Bursar at the address shown with a note indicating your payment is for a transcript request submitted by fax.

First Term Enrolled: \_\_\_\_\_

Last Term Enrolled: \_\_\_\_\_

Your Signature: \_\_\_\_\_

***Request will not be filled unless this form is signed.***

Total Number of transcripts requested: \_\_\_\_\_ Total charge @ \$5.00 per copy: \_\_\_\_\_

**INSTRUCTIONS FOR PROCESSING TRANSCRIPT:**

**Mark only one of the following:**

- Process now.
- Process after degree award:  
\_\_\_\_\_ Term \_\_\_\_\_ Yr.
- Process after final grades:  
 Check here if you are expecting early grades for courses which end prior to term end.  
\_\_\_\_\_ Term \_\_\_\_\_ Yr.
- Process after grade change:  
Course Number: \_\_\_\_\_  
\_\_\_\_\_ Term \_\_\_\_\_ Yr.

**Special Instructions – Mark all that apply:**

- Please mark this box if transcript(s) is being issued directly to the student and should be issued in individually sealed envelope(s) with the Registrar's signature across the flap of the envelope.
- Send by Express Mail – Extra charge incurred:  
The fee for transcripts is \$5.00 per copy unless you request to have it sent by express mail. In that case, by checking this box you agree to pay the current Express Mail rate (\$18.95 as of January 21, 2012) in addition to the transcript fee. Express mail rates for delivery outside the United States vary. Postal rates are subject to change. Check with the U.S. Postal Service for the exact charge.

**Mark only one of the following:**

- I will pick up. Allow 3 working days for processing. You must show a picture ID to pick up your transcript at the Service Center, Rendleman Hall Room 1309.
- Mail transcripts to the following recipient at the following address (one addressee per form)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Mail with payment to:**

SIUE Office of the Bursar  
Rendleman Hall Room 1101  
6 Hairpin Dr., P.O. Box 1042  
Edwardsville, IL 62026-1042  
Fax #: 618/650-3332 (preferred) or 650-2081