

# TRANSCRIPT REQUEST

Avila University, Office of the Registrar  
11901 Wornall Road, Kansas City, MO 64145

- ◆ Please mail completed form to the above address with payment.
- ◆ Official Transcripts cost \$20.00 per copy by cash/check/money order payable to Avila University if printed.
- ◆ Official Transcripts cost \$15.00 per copy by cash/check/money order payable to Avila University if mailed electronically.
- ◆ No charge for Unofficial Transcripts.
- ◆ All hand-carried or mailed to student transcripts are "Issued to the Student" and may not be accepted as "Official", even if bearing the seal of the university. Check with recipient before requesting.

Current Last name                      First                      Middle                      SSN or Avila ID #

Name(s) while attending Avila                      Other Former Name(s)                      Birth date

Current Address                      City                      State                      Zip

(\_\_\_\_\_) \_\_\_\_\_

Telephone Number                      Email Address (if not currently enrolled)

Reason for request (ex: employment, admissions) \_\_\_\_\_

Student Signature                      Today's Date

**SEND TRANSCRIPT(S) TO:** (Please write any other addresses on the back of this page.)

(1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check all that apply:  
\_\_\_\_ Official    \_\_\_\_ Unofficial  
\_\_\_\_ Hold for Grades (Yr./Term): \_\_\_\_\_  
\_\_\_\_ Hold for Degree (Graduation Date): \_\_\_\_\_  
\_\_\_\_ Mail now  
\_\_\_\_ Student will pick up/Date needed: \_\_\_\_\_

Check all that apply:  
\_\_\_\_ Official    \_\_\_\_ Unofficial  
\_\_\_\_ Hold for Grades (Yr./Term): \_\_\_\_\_  
\_\_\_\_ Hold for Degree (Graduation Date): \_\_\_\_\_  
\_\_\_\_ Mail now  
\_\_\_\_ Student will pick up/Date needed: \_\_\_\_\_

Are you currently enrolled at Avila? Yes \_\_\_\_ No \_\_\_\_ If no, when did you last attend? Yr./Term \_\_\_\_\_

**Degree(s) earned at Avila:**

Degree \_\_\_\_\_ Major: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Degree \_\_\_\_\_ Major: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

**Office Use Only**

Cash \_\_\_\_ Check# \_\_\_\_\_ Amount:\$ \_\_\_\_\_

Number of Copies: \_\_\_\_\_ Date Sent: \_\_\_\_\_

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