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 \$18.00 per copy by cash/check/money order payable to Avila University if sent 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 nan	me First	Middle		SSN or Avila ID#	
Name(s) while attending Avila		Other Former Name(s)		Birth date	
Current Address		City State		Zip	
()					
•		·	Email Address (if not currently enrolled)		
Reason for reque	est (ex: employment, admi	issions)			
			_		
Student Signature				Today's Date	
SEND TRA	NSCRIPT(S) TO: (Please write any other addresses on	the back of this page.)		
			r the outer of this page.)		
(1)		(2)			
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Check all that a	annly:	Check all that	at annly:		
OfficialUnofficial		Official	Official Unofficial		
	Grades (Yr./Term): Degree (Graduation Date): _		or Grades (Yr./Term): or Degree (Graduation Dat		
Mail now	1	Mail no		e):	
Student will pick up/Date needed:		Studen	Student will pick up/Date needed:		
Are you currentl	y enrolled at Avila? Yes	sNoIf no, when did y	ou last attend? Yr./Terr	n	
Degree(s) earne	ed at Avila:				
Degree	Major:			Oate:	
Degree Major:			Graduation Date:		
		Office U	Use Only		
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