

Official Transcript Request

- If you have both a major credit card and a valid email address, please see www.ndsu.edu/registrar/records/transcript.
- Please note that ordering online is the fastest method of obtaining an official transcript.

STUDENT INFORMATION

Student ID#: _____ Date of Birth: _____

Full/Legal Name: _____ Former Name(s): _____

Mailing Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Email Address: _____ Daytime Phone: _____

Are you currently enrolled at NDSU? ☐ Yes ☐ No If **No**, when did you attend? ☐ Before 1982 ☐ 1982-2002 ☐ After 2002

Did you attend MedCenter One or Sanford College of Nursing in Bismarck? ☐ Yes ☐ No

RECIPIENT INFORMATION

☐ Hold for Pickup ☐ Send to me at address listed above ☐ Send to recipient listed below

Organization/Institution: _____

Contact Person: _____ Phone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip/Postal Code: _____

ORDER INFORMATION

Processing Options:

☐ Send Now

☐ At the time when grades are posted for the following semester: ☐ Fall ☐ Spring ☐ Summer YEAR: _____

☐ At the time when degrees are posted for the following semester: ☐ Fall ☐ Spring ☐ Summer YEAR: _____

Rush Delivery Options*:

orders placed by **2 p.m. U.S. Central time will be processed same-day; orders placed after 2 p.m. are processed following business day*

- ☐ No Rush Delivery
- ☐ Same Day Pickup add **\$20.00**
- ☐ FedEx (U.S., Canada, or Mexico) add **\$25.00**
- ☐ FedEx (International) add **\$45.00**

AMOUNT DUE: Number of Copies: _____ x **\$15.00** per transcript + _____ rush delivery surcharge (if applicable) = **Total** _____

Please enclose a check or money order made payable to NDSU for the total amount and send payment and form to:

Office of Registration and Records
NDSU Dept. 2801, P.O. Box 6050
Fargo, ND 58108-6050

OR bring both payment and form to the Office of Registration & Records on campus at **Ceres Hall 110**

☐ I understand that my request will not be processed if there is a hold on my NDSU account.

Signature: _____ Date: _____

For Office Use Only

Date Paid _____ Received By _____ Receipt Number _____

☐ Check (number _____) ☐ Cash ☐ Money Order (number _____) ☐ Sent _____