

Official Transcript Request

- If you have both a major credit card and a valid email address, please see www.ndsu.edu/onestop/official-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 Send eTranscript (electronic) to recipient listed below

Organization/Institution: _____ Email Address: _____

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 _____