FLORIDA ATLANTIC UNIVERSITY

Office of the Registrar
777 Glades Road
Boca Raton, FL 33431
Phone: 561.297.3050

OFFICIAL TRANSCRIPT REQUEST

This form is only used for mail in requests

- Transcripts will ***not*** be released if financial obligations have not been satisfied.
- Please use a ***separate form*** if mailing to more than ***one address***.
- A picture ***ID*** is required to pick up a transcript.
- Allow ***three to five*** working days for processing.
- All transcripts are $10 per copy. (Check or Money Order).
- Please attach any addendums you wish to be sent with this Official Transcript.
- Overnight and 2nd day mail use street address only, UPS does not deliver to PO boxes. (Please include a separate check or money order for UPS Overnight or 2nd Day delivery)

_____
Date of Birth

Z								

Student ID Number (Z#)

Last Name (Maiden Name) First Name Middle Name

Street Address City State Zip

Phone Number FAU E-mail Address (for Current Students)
Alternative Email (Former Students)

Check one: ☐ **Pick Up** _____ **Transcript(s)** (#) ☐ **Mail** _____ **Transcript(s)** (#)

☐ **Overnight** (Additional $36.00) ☐ **2nd Day** (Additional $22.00) ☐ **Regular Mail** (No Additional Charge)

☐ Now

☐ After current term's grades are posted

☐ After degree is posted

☐ After certifications are posted

Please use a separate form for each address if mailing to more that one address.

Send Transcript(s) to:

_____
Name/Institution

_____
Attention to

_____
Street Address

_____
City/State/Zip

_____ _____
Signature Date

100799