



Office of the National Registrar

### Official Transcript Request Form

Please fill out one request form for each address to which you want your transcript sent. You must print the form and follow the directions below. This is not an electronic form.

<input type="checkbox"/> Cincinnati <input type="checkbox"/> Los Angeles <input type="checkbox"/> New York	Degree Program	Last Year Enrolled or Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No		Number of Copies
Last Name (Name used while in attendance)		First Name	Middle Initial	Maiden Name
Current Street Address				Date of Birth
City	State	Zip Code	Telephone Number	
Signature		Email Address		Today's Date

**Please allow 3-5 working days once received for processing. There may be delays during grading periods at the end of each semester. The Office of the National Registrar only provides official transcripts. They are produced on security paper which includes a watermark and the signature of the National Registrar. Unofficial transcripts and scanned transcripts are not provided.**

#### Mail To:

Name/Organization			<b>There is a \$5.00 charge for each transcript requested.</b>  Mail To: Hebrew Union College Jewish Institute of Religion Office of the National Registrar Brookdale Center One West 4 <sup>th</sup> Street New York, NY 10012  <b>You may fax your request to (212) 533-0129</b>
Street Address			
City	State	Zip Code	

#### Billing Information:

Cardholder Name	Card Number	Expiration Date
Cardholder's Signature		