



Office of the National Registrar

Official Transcript Request Form – Siegal College

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.

___ Siegal College	Degree Program	Last Year Enrolled or Graduated		Number of Copies
		Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No		
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	<p align="center">There is a \$5.00 charge for each transcript requested.</p> <p>Mail To: Hebrew Union College Jewish Institute of Religion Office of the National Registrar 3101 Clifton Avenue Cincinnati, Ohio 45220</p> <p>Email: registrar@huc.edu</p> <p>You may fax your request to (513) 221-2531</p> <p>We accept checks, money orders and all credit cards</p>		
Street Address			
City	State	Zip Code	

Billing Information:

Cardholder Name	Card Number	Expiration Date
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