



WILLIAM JEWELL COLLEGE

Office of the Registrar ✧ Box 1025 ✧ 500 College Hill ✧ Liberty, MO 64068
Phone: 816-415-5979 ✧ Fax: 816-415-5005

TRANSCRIPT REQUEST

PLEASE NOTE:

- ➔➔➔ 1. All applicable blanks on this form must be completed. **Your signature is required by Federal law for your transcript to be issued.**
- ➔➔➔ 2. Unless currently enrolled, all transcripts are **\$5.00 each**, payable at time of request (*plus fax and/or rush fees, if applicable*).
- ➔➔➔ 3. **PAYMENT IN FULL MUST BE INCLUDED WITH TRANSCRIPT REQUEST.** Acceptable Methods of Payment include:
 - > **Request by Fax:** Online Payment via Credit / Debit Card (must include printed *Payment Confirmation* with faxed *Transcript Request*)
 - > **Request by Mail:** Check, Money Order, Online Payment via Credit / Debit Card (must include printed *Payment Confirmation* with request)
 - > **Request in Person:** Cash, Check, Money Order, Credit / Debit Card (Checks and money orders should be made payable to *WJC*.)
- ➔➔➔ 4. Requests for RUSH processing (next business day) = **\$10 Additional Rush Fee** (Regular Mail Only — No Overnight Mail Service available)
- ➔➔➔ 5. Please allow 2-3 business days for processing of transcripts (possibly longer during peak times).
- ➔➔➔ 6. **Transcripts will not be issued for former students who still have a financial obligation to the College or any other account hold.**
- ➔➔➔ 7. This College's student information release policy complies with federal regulations pursuant to FERPA (*Family Education Rights and Privacy Act*).

Please **PRINT** clearly:

(LAST NAME) (FIRST) (MIDDLE)

(STREET ADDRESS)

(CITY) (STATE) (ZIP)

(ALL PREVIOUS NAMES under which you were enrolled—maiden, married, etc.)

(SOCIAL SECURITY NO. or WJC ID NO.)

(DATE OF BIRTH)

(HOME PHONE or CELL PHONE)

(EMAIL ADDRESS)

Reason for Request:

- Employment
- Grad School
- Scholarship
- Transferring from WJC
- Other: _____

Your WJC Status — please check ✓ one:

- Currently Enrolled Student (*no charge*)
- WJC Graduate Grad Year: _____
- Former Student (*did not graduate from WJC*)
Last Year Attended: _____ (*approximate*)

Processing Instructions:

- SEND NOW (*Regular Processing — 2-3 days*)
- RUSH! (*next business day—Additional \$10 Fee*)
- HOLD for Current Semester grades to be posted
- HOLD for Graduation Information to be posted
- OXBRIDGE Major (Include Oxbridge description)

Transcript Order: TOTAL NUMBER OF TRANSCRIPTS: _____ OFFICIAL (officially sealed envelope) UNOFFICIAL

PICK UP in person at Registrar's Window (*Must designate in writing if another person is authorized to pick up.*)

MAIL to SELF at above address

MAIL to: _____ (Name of Institution, Company, Agency, Etc.) _____ (Name of Person, Department, Office, Etc.)

_____ (Street Address or P. O. Box) _____ (City) _____ (State) _____ (Zip)

Check if: Additional recipients listed on reverse side of this form. Additional recipients listed on attached separate sheet.

FAX to: (_____) _____ - _____ Attention: _____ (Additional \$5.00 Fax Fee)

Additional Instructions or Comments: _____

Total Paid: \$ _____ Method: Credit / Debit Card (Online In Person) | Cash | Check # _____ | Money Order # _____

➔ _____ (YOUR SIGNATURE — **REQUIRED BY LAW**) _____ (DATE) *(It is against the law to order transcripts for anyone other than yourself.)*

FOR OFFICE USE ONLY:

PAYMENT METHOD: Credit / Debit Card / App. Code _____ | Cash | Check # _____ | Money Order # _____

\$ _____	\$ _____	\$ _____	\$ _____	_____	_____	_____
TOTAL PAID	TRANSCRIPTS	RUSH FEE	FAX FEE	DATE RECEIVED	DATE PROCESSED	BY