

University of Minnesota Duluth
REQUEST FOR TRANSCRIPT

IMPORTANT INFORMATION

- Transcripts will not be issued for individuals with financial holds.
- Transcripts are usually mailed in 2–3 working days; records prior to 1972 may take longer.
- All official transcripts are certified and signed by the University registrar; each is mailed in a separate sealed envelope. Do not open if you are forwarding to another party (institution, employer, etc.) Open the envelope only if you have ordered for personal use.
- Requests will *not* be held for grades or degrees that have not been posted (you can check the status of your grades and degree at the *Unofficial transcripts* link at <http://www.d.umn.edu/registrar/transcripts.html>).
- Allow two weeks for U.S. mail delivery to domestic destinations, three weeks for mail delivery to international destinations.
- Requests will not be processed without payment. **NOTE: Overpayments of \$5.00 or less will not be refunded.**

If you have an active University of Minnesota Internet ID (x.500 username) and password, you can order transcripts online. Visit <http://www.d.umn.edu/registrar/transcripts.html> and click on *Request official transcript online*.

Mail request and payment to:
Transcripts
University of Minnesota Duluth
184 Darland Administration Building
1049 University Drive
Duluth MN 55812

Request transcripts in person at:
Student Assistance Center (SAC)
University of Minnesota Duluth
23 Solon Campus Center

Fax requests to: 218-726-8219

INSTRUCTIONS—Refer to instructions as you complete the form.

- *Please print clearly.*
- **Name**—Print your name and the former name(s) you used while you were attending (if different).
- **Signature**—You must sign the form. Your request will be returned to you if you do not sign the form.
- **Birth date**—This will help us to look up your record.
- **ID number and SSN**—You only need to include your Social Security number if you do not know your University of Minnesota ID number.
- **Daytime phone number and/or e-mail address**—This information is essential; we may need to contact you with questions that we encounter while processing your request.
- **Dates attended/degrees earned**—Please indicate the dates that you attended and degrees that you earned.
- Enter the addresses where you want official transcript(s) to be sent. You must provide complete mailing addresses or the processing of your request will be delayed. Indicate what type of delivery service you would like **for each address**. You may choose to add fax service (to the same destination) on Rush, Overnight Priority, and International Priority orders. You must include fax numbers for any fax service requests, or your request will be delayed.
- Indicate the number of transcripts you requested on the chart provided. Calculate the total cost of your order.
- **Payment method**—If you're faxing this request, you must pay by credit card. In-person and mail requests may be paid by Transcript Payment Card, check, money order or credit card. Checks or money orders must be made payable to the University of Minnesota.

The University of Minnesota is an equal opportunity educator and employer.
To request copies of this form in an alternative format, please call 218-726-8000.

**University of Minnesota Duluth
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Refer to instructions on page 1.

First name	Middle	Last	Former	
Student's written signature (required)		Birth date	Social Security number	U of M ID number
Street address		City	State	Zip code
Daytime phone	E-mail address			
Dates attended/degrees earned				

OFFICIAL TRANSCRIPTS	QUANTITY	COST	TOTAL
Regular (mailed or picked up within 2-3 business days. Allow sufficient time for delivery by U.S. mail; up to 3 weeks for international mail.)		\$5 each	
Rush service (mailed or picked up same day if received by 2 pm. Allow sufficient time for delivery by U.S. mail; up to 3 weeks for international mail.)		\$10 each	
Fax & Rush service (faxed plus official copy mailed same day/same destination if received by 2 pm. Allow sufficient time for delivery by U.S. mail; up to 3 weeks for international mail.)		\$10 each	
Priority Overnight (next-business-day delivery by 3 pm to most U.S. addresses if order is received by 2 pm)		\$10 each transcript, plus \$15 shipping fee for each address	
Fax & Priority Overnight (faxed and next-business-day delivery to same destination by 3 pm to most U.S. addresses if order is received by 2 pm)		\$10 each transcript, plus \$15 shipping fee for each address	
International Priority (orders received by 2 pm will be sent by International Priority service. Delivery time is approximately 2-5 days.)		\$10 each transcript, plus \$20 shipping fee for each address	
Fax & International Priority (orders received by 2 pm faxed and sent by International Priority service to same destination for delivery in 2-5 days.)		\$10 each transcript, plus \$20 shipping fee for each address	
TOTAL QUANTITY REQUESTED		TOTAL AMOUNT DUE	

PAYMENT METHOD	PAYMENT AMOUNT
Transcript Payment Card (available from Cashier's Office, 1 st Floor DAdB) # cards ____ X \$5.00	
Check or money order payable to the University of Minnesota Duluth	
<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Diner's Club <input type="checkbox"/> Discover Card <input type="checkbox"/> American Express	
Account #: ____/____/____ - ____/____/____ - ____/____/____ - ____/____/____ Exp. Date: ____/____/____	
TOTAL AMOUNT PAID	

CHOOSE DELIVERY METHOD AND ORDER DETAIL		
Quantity	Quantity	Mailing address:
____ Regular service	____ Pick up at Student Assistance Center (SAC)	
____ Rush service	____ Fax* & Rush service	
____ Priority Overnight	____ Fax* & Priority Overnight	
____ International Priority	____ Fax* & International Priority	
____ Number of copies mailed to this address	* Fax # for rush service to same destination as above: () ____ - ____ - ____	

Check if additional addresses are on the next page.

<input type="checkbox"/> Free, UNOFFICIAL transcript (limit one per day)	<input type="checkbox"/> to be picked up, in person, up at SAC, 23 Solon Campus Center
	<input type="checkbox"/> Mail to: _____

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Refer to instructions on page 1.

Current name: (first, middle, last)	Former last name(s)	Student ID number
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CHOOSE DELIVERY METHOD AND ORDER DETAIL		
Quantity	Quantity	Mailing address:
<input type="checkbox"/> Regular service	<input type="checkbox"/> Pick up at SAC	
<input type="checkbox"/> Rush service	<input type="checkbox"/> Fax* & Rush service	
<input type="checkbox"/> Priority Overnight	<input type="checkbox"/> Fax* & Priority Overnight	
<input type="checkbox"/> International Priority	<input type="checkbox"/> Fax* & International Priority	
<input type="checkbox"/> Number of copies mailed to this address		
		* Fax # for rush service to same destination as above: () _ _ - _ _ _ _

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<input type="checkbox"/> Regular service	<input type="checkbox"/> Pick up at SAC	
<input type="checkbox"/> Rush service	<input type="checkbox"/> Fax* & Rush service	
<input type="checkbox"/> Priority Overnight	<input type="checkbox"/> Fax* & Priority Overnight	
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