



STUDENT OFFICIAL TRANSCRIPT REQUEST FORM

PART 1: YOUR INFORMATION

TODAY'S DATE _____

NAME _____

STUDENT ID or BIRTHDATE _____

PHONE _____

EMAIL ADDRESS _____

MARK "X" IF ACADEMIC RENEWAL _____

PART 2: OFFICIAL TRANSCRIPT REQUEST FEE

Official Transcripts are \$9.00 each. Upon receipt of this request, we will email you a transcript invoice. Below, add the number of transcripts you want mailed and the total owed.

NOTE: FIDM does not charge current students. Former students are not charged for Unofficial Transcripts or Official Transcripts sent to ASU.

- Do not include these requests in the "Total Owed" below.

of Transcripts needed _____

PAYMENT _____ x \$9.00

TOTAL OWED (# x \$9.00) \$ _____

PART 3: STUDENT SIGNATURE

Your signature is required to fulfill this request.

_____ DATE _____

PART 4: ADDRESSES TO MAIL OFFICIAL TRANSCRIPTS

Organization / Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

email: _____

Organization / Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

email: _____

Organization / Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

email: _____

If you have any questions after submittal of this form, email us at registrarla@fidm.edu or call (213) 624-1200 x3421.