

# Request for Official Transcript

## STUDENT INFORMATION: (PLEASE PRINT OR TYPE LEGIBLY)

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Last 4 of SSN \_\_\_\_\_

Banner ID # (If Known) \_\_\_\_\_

Dates Attended: From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

(By signing, I certify that I am the above student requesting my NCCU transcript)

SIGNATURE \_\_\_\_\_ Date of Request \_\_\_\_\_

TRANSCRIPTS ARE **\$10.00** PER COPY

Number of Copies \_\_\_\_\_ Amount Paid \_\_\_\_\_ Payment Confirmation # \_\_\_\_\_

**If you DO NOT include your Confirmation # or the Amount Paid, your Transcript Request WILL NOT be processed.**

DEBIT/CREDIT CARDS ACCEPTED Call: (919) 530-6209

### Mail Transcript Request and Money Order or Cashier's Check to:

North Carolina Central University  
Office of the University Registrar  
1801 Fayetteville Street, Room 102, Durham, NC 27707  
Phone: (919) 530-6654  
or  
FAX Form to: (919) 530-7974

### Send Official Transcripts to:

Name \_\_\_\_\_

Address \_\_\_\_\_

Standard Mail is included however there is an additional \$27.10 cost for Priority Express 1-2 Business day Mailing.  
Priority Express Mail requests and payment must be received before 11:00am the day of the request to be pr

Send Transcript now \_\_\_\_\_ Hold for Current Semester Grades \_\_\_\_\_ Hold for Degree Posting \_\_\_\_\_

ALL FINANCIAL OBLIGATIONS MUST BE SATISFIED  
BEFORE THIS REQUEST IS PROCESSED

OFFICE USE ONLY	
Number of Transcripts _____	Amount Paid _____
Type of Payment _____	Initials _____
Date ____ / ____ / ____	

RFV, Aug 17, 2015