TRANSCRIPT REQUEST FORM

$10 Fee per Official Transcript

RETURN FORM TO:
Northcentral University, Attn: Office of the Registrar, 8667 E Hartford Dr Ste 110, Scottsdale, AZ 85255
Fax: (928) 515-5654 / E-mail: transcriptreq@ncu.edu

STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Name</th>
<th>Name at Time of Attendance (if different)</th>
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<tbody>
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<table>
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<tr>
<th>Date of Birth</th>
<th>Last 4 digits of SSN</th>
<th>Dates of Attendance</th>
<th>Graduation Year</th>
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<tr>
<th>Address</th>
<th>City, State, Zip</th>
<th>Phone</th>
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RECIPIENT INFORMATION

<table>
<thead>
<tr>
<th>Name</th>
<th>and/or</th>
<th>Institution</th>
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Choose a Delivery Option:

- [ ] Option One: Physical Delivery – Mail Transcript To:
  - Address
  - Address 2 (optional)
  - City
  - State
  - Country
  - Postal Code

- [ ] Option Two: Electronic Delivery – E-mail Transcript To:
  [Please verify that the institution will accept an electronic version of your official transcript. At this time electronic transcripts cannot be sent to Yahoo e-mail addresses.]

Choose Quantity and Type:

- Number of copies: __________
- Send Transcript:
  - [ ] Now (allow 7 – 10 business days processing time)
  - [ ] When grade in current course has posted
  - [ ] Once degree is conferred

Transcript Type:
- [ ] Official
- [ ] Unofficial – no charge

AUTHORIZATION

With my signature, I authorize Northcentral University to release copies of my academic records to the person or institution indicated above.

<table>
<thead>
<tr>
<th>Student’s Signature</th>
<th>Date</th>
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PAYMENT INFORMATION

- Number of Transcripts Ordered: __________
  $10.00 per official transcript = Total Amount Due: __________

- Check Enclosed: [ ]
- Charge Credit Card: [ ]

- Visa [ ] MasterCard [ ]
- AMEX [ ] Discover [ ]

- Credit Card Number
- Expiration Date