



Please mail same day as request received \$15
(Transcripts typically processed in 3-5 business days)

Transcript Request Form – (we do not provide unofficial transcripts)

Registrar's Office, 701 N Clinton St, Defiance, OH 43512 **Phone:** 419-783-2551 **Fax:** 419-783-2579

Costs: There is a \$5.00 charge for each transcript (add \$1.00 for each additional transcript to same address).
Same day processing requests are a total of \$15.00. Transcripts are not faxable.
We accept check, Visa, MasterCard, and Discover (We do NOT accept American Express).

Note: Student's financial obligations to the College must be clear before transcript(s) can be furnished.

Print Student Full Name _____ Maiden/Other _____

Street Address _____ City _____ State _____ Zip _____

Home/Cell Phone _____ Date of Birth _____ SSN _____

Work Phone _____ Email Address _____ **Pmt Amt \$** _____

Credit Card # _____ Exp Date _____ Security Code _____

Visa Mastercard Discover Cardholder Signature _____

Please check one of the following:

- Current Student
- Current Transient/Guest Student
- Not a Current Student
 - Last Year Attended _____

Send Immediately
OR

Hold Request for:

Final Grades for _____ semester

Transfer credit from another college _____

Grade change for _____

Degree to be posted _____

Under the provisions of the Family Education Rights and Privacy Act of 1974, I authorize Defiance College to release a transcript(s) of my academic record to the individual(s) and/or organization stated on the request.

Signature Required for Release _____ **Date** _____

Print clearly the complete **Name(s) and Address(es)** to Mail Transcript(s) to.
If address provided is not complete, transcript will not be released.

Quantity to send: _____ Quantity to send: _____ Quantity to send: _____