



Purdue University Global Transcript Release Form

Students must submit all Purdue Global transcript requests in writing. Transcript requests will be processed within 7-10 business days. Please fill out the following information completely.

Student Information

LAST NAME: _____ FIRST NAME: _____ MIDDLE INITIAL: _____
NAME(S) WHILE ATTENDING SCHOOL: _____
STREET ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
HOME TELEPHONE: _____ EMAIL ADDRESS: _____
LAST FOUR DIGITS OF SSN: _____ DATE OF BIRTH: _____

Transcript Request

TRANSCRIPT TYPE REQUESTED: CONCORD LAW SCHOOL PURDUE GLOBAL UNIVERSITY PURDUE GLOBAL OPEN COLLEGE
 OTHER: NAME OF SCHOOL: _____
CITY/STATE: _____ DATES OF ATTENDANCE: _____

UNOFFICIAL TRANSCRIPT

PLEASE RELEASE COPIES OF MY UNOFFICIAL TRANSCRIPTS TO EACH OF THE ADDRESSES BELOW.

MY CURRENT ADDRESS LISTED ABOVE

ATTN: _____ ADDRESS: _____
 ATTN: _____ ADDRESS: _____

OFFICIAL TRANSCRIPT

Official transcripts are only released if the student has met all financial obligations to the University. There is a \$10.00 fee for each copy. An additional fee of \$25.00 is required if rush delivery is requested. Please attach a check for the total amount required or include your credit card information below.

PLEASE RELEASE COPIES OF MY OFFICIAL TRANSCRIPTS TO EACH OF THE ADDRESSES BELOW.

MY CURRENT ADDRESS LISTED ABOVE

ATTN: _____ ADDRESS: _____
 ATTN: _____ ADDRESS: _____

Payment Information

PAID ONLINE CHECK/MONEY ORDER (Enclosed) Make checks payable to: Purdue University Global
 VISA MASTERCARD DISCOVER AMERICAN EXPRESS

TOTAL PAYMENT ENCLOSED \$ _____ CARD #: _____ EXPIRATION DATE (M/YY): _____
CARDHOLDER'S NAME: _____ ADDRESS: _____

Authorization

I hereby authorize the release of my academic transcript from Purdue University Global to the party(ies) named above.

Student's Signature (e-signature not accepted): _____ Date: _____

By Mail
Purdue University Global
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Chicago, IL 60607

By Email
Registrar@PurdueGlobal.edu

By Fax
800-588-4127