## OFFICIAL ACADEMIC TRANSCRIPT REQUEST - BY MAIL ONLY

Husson University \* Registrar's Office
One College Circle \* Bangor, ME 04401

Student Name:			2 <b>07-941-7151 * registrar</b> Maide			
					Date of Birth:	
Are you a current student	? Yes	No	If no, when did y	ou last atte	nd:	
Did you attend NESCom:	Yes	No	If yes, when did	you last atte	end:	
Would you like us to sen					essed once the final grading period has closed	
			From the			
	_	-			tion date is)	
Transcript Fees:  Free (up to 5 - additional constant Same day service \$5.00) Transcripts mailed within the			opies are \$3.00 each) he Husson University system are at no charge			
I am requesting the follo	wing service:					
	of transcripts to	dress listed above be mailed to you them - Issued d	1	<u>OR</u> Issued	d in a sealed envelope	
	of transcripts to	be picked up			will be applied if picking up today)  I in a sealed envelope	
	cript to person or of transcripts to		below (NOT GUA)	RANTEED	SAME DAY SERVICE)	
		person or institut be sent TODAY		AME DAY	SERVICE CHARGE WILL APPLY)	
	ICE WILL NOT	BE HELD RESPO			yourself, please provide us with a complete addre ION-ARRIVAL OF YOUR TRANSCRIPT IF	
Student Signature (requ	ired):				Date:	
must release this transcrip	ts and diplomas, ots will be release	law allows that i	f you owe \$2,500 or	more you w	ng transcripts due to past due/owed debts. While ill be required to establish a payment plan with you need to setup a payment plan to ensure yo	
Financial Clearance by:_					Date:	
			EOD OFFICE LISE O	NII W	Third Party	

Total Charge\_\_\_\_\_ Paid by: Cash\_\_\_\_ Check #\_\_\_\_Money Order #\_\_\_\_

Transcript Prepared By:\_\_\_\_\_\_Date Sent or Picked Up:\_\_\_\_\_