

No charge
for this service

REQUEST FOR TRANSCRIPT
Office of the Registrar
Rensselaer Polytechnic Institute
110 8th St.
Troy, NY 12180-3590

Office use only (Rev 6/08)
Name: _____
Date sent: _____

Phone: 518-276-6231 FAX: 518-276-6180 Email: registrar@rpi.edu

- **PLEASE ALLOW 1-2 BUSINESS DAYS FOR PROCESSING REQUESTS**
- **ALL FINANCIAL OBLIGATIONS TO RENSSELAER MUST BE RECONCILED BEFORE TRANSCRIPTS WILL BE RELEASED**

Student ID # : _____ - _____ - _____

Date: _____

Name: _____
(LAST) (FIRST) (MI)

Phone #: _____

Your Signature: _____

Dates
Attended: _____
RPI (mo/yr-mo/yr)

Email address: _____

TRANSCRIPT TYPE

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OFFICIAL TRANSCRIPT: Students may request one official transcript for personal use per semester. All other transcripts will be addressed to the agency for which they are ordered, and mailed by either this office, or by the student.

_____ Process immediately _____ Include attached form
_____ Send after my degree is posted at end of current semester
_____ Send after current semester grades and ranks are posted

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UNOFFICIAL TRANSCRIPTS: Quantity _____ (Student may request up to 10 unofficial transcripts per term)
_____ Process immediately
_____ Send after my degree is posted at end of current term
_____ Send after current semester grades and ranks are posted

DELIVERY METHOD

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CHECK HERE IF YOU WILL PICK UP THE TRANSCRIPTS.

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MAIL TRANSCRIPT TO: (Please Print Clearly)

PLEASE NOTE: TRANSCRIPTS MAY NOT BE FAXED OR EMAILED TO ANY DESTINATION