

On-campus and online students submit this completed form to:

**Ashford University Office of the Registrar, 400 North Bluff Blvd., Clinton, IA 52732 ♦ Tel: 877.241.9893 ext. 1112
♦ Fax: 563.241.4443 or 888.343.2235 ♦ Email: transcriptrequest@ashford.edu**

Student Information:

Student Name: _____ Student ID: _____

Name while attending (if different): _____ Dates of attendance (dd/mm/yyyy): _____

Current Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____ Email: _____

Students who provide an email address will be notified within 24 hours (during business days) of receipt of this request. If you provided an email address and have not received e-mail confirmation that your request was received, please contact the Office of the Registrar at one of the phone numbers above.

Note: One Unofficial Transcript will be released per request.

For security purposes, unofficial transcripts may only be sent directly to the student. Transcripts are released only after all outstanding balances are paid in full. Normal processing time is 2-3 business days. Please allow a longer lead time for processing requests made at the beginning or end of the semester.

Send Unofficial Transcript To:

Student at the above email address (unofficial transcripts are only released to the student).

I authorize the Registrar's Office to release my unofficial transcripts to the email address listed above.

SIGNATURE: _____
Electronic signature not accepted

DATE: _____

For Office Use Only: Date received: _____ Date processed: _____

Processed by: _____ If not processed, indicate reason: _____

Date student notified: _____ Notified by: _____