



Office of the Registrar  
13 Oak Drive  
Hamilton, NY 13346

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**OFFICIAL TRANSCRIPT REQUEST FORM**

**Per the Family Education Rights and Privacy Act of 1974, we cannot release a transcript without the student's consent and signature.**

**PLEASE PRINT:**

Current Last Name (& suffix, i.e. Jr., II) \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Date of Birth \_\_\_\_\_

Prior Last Name (& suffix) \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Colgate ID # or last 4 digits of SSN \_\_\_\_\_

**\*\*Note: NAME WHEN YOU ATTENDED/only if it's different than current name.**

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Status:  In Progress  Graduated  Other \_\_\_\_\_ What years did you attend? \_\_\_\_\_ Degree Program:  Bachelor's  Master's

**PLEASE INDICATE WHEN TO SEND:**

- Send now** -- Typical processing times is 2-4 business days from date of receipt.
- HOLD** for current semester grades
- HOLD** until degree is conferred

I understand that my official transcript will be delivered via the method I selected below and that any holds currently on my record will prevent the release of my transcript.

X \_\_\_\_\_  
Student's Signature Date

**PLEASE INDICATE DELIVERY METHOD:**

--Note: Only one option per form is acceptable.

- Mail to recipient:**  
\*Print complete name and address clearly.  
\*One copy will be mailed unless otherwise indicated.  
\*Attach a separate sheet if more than one recipient is requested.  
\*If transcript is not received by recipient, another request will be needed.
- Send electronic transcript via eSCRIP-SAFE™ to recipient:**  
\*For students who graduated in 1997 through currently enrolled.  
\*Complete email address is required. Delays may occur if not.  
\*One transcript will be sent to the email address provided.  
\*Attach a separate sheet if more than one recipient is requested.  
\*Unable to send to an email address that's longer than 30 characters.  
\*See the Registrar's web page for details regarding electronic transcripts.
- Express Mail service to recipient:**  
\*Fee for Express Mail (see below for payment) - \$20 for domestic  
\$35 for international  
\*Print complete name and address clearly.  
\*Only processed once payment is cleared.  
\*Mailed using United States Postal Service only.  
\*Maximum of 15 transcripts in one Express Mail envelope.  
\*Attach a separate sheet if more than one recipient is requested.  
\*This service is NOT available for sending anywhere on campus.  
\*Signature is required for delivery. Please initial here to waive \_\_\_\_\_  
(Waiving signature is *only* recommended when sending to a home address.)

**RECIPIENT INFORMATION - FOR MAILING:**

Number of copies to recipient(s): \_\_\_\_\_

- Email confirmation when transcript has been sent out.
- Check here if attaching additional pages to this request form.
- Please send to my campus box \_\_\_\_\_

Print complete name and address clearly here:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR ELECTRONIC TRANSCRIPT ONLY:**

Complete email address required. Please print clearly.  
\_\_\_\_\_  
\*Due to system limits email addresses cannot be longer than 30 characters.

**FOR EXPRESS MAIL SERVICE ONLY:**

- Charge my 'Gate Card'  
\*Only available for current and active students with \$\$ on their card.
- Credit Card: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

X \_\_\_\_\_  
Signature of **CARD HOLDER** is required for this type of service.

**REGISTRAR'S USE ONLY:**

Revised: 7/11 SR

Dated mailed: \_\_\_\_\_

ET#: \_\_\_\_\_ E: \_\_\_\_\_  
FH: \_\_\_\_\_ E: \_\_\_\_\_ C: \_\_\_\_\_

GC: \_\_\_\_\_ P: \_\_\_\_\_ C: \_\_\_\_\_  
CCD: \_\_\_\_\_ P: \_\_\_\_\_ C: \_\_\_\_\_