



# TRANSCRIPT REQUEST FORM

## OFFICE OF THE REGISTRAR

Hepburn Hall-214  
Email: Registrar@njcu.edu  
Website: www.njcu.edu/registrar  
Phone: (201) 200-3334 Fax: (201) 200-2062

### REGULAR SERVICE:

IF YOU HAVE AN **OUTSTANDING BALANCE**, TRANSCRIPT REQUEST WILL NOT BE PROCESSED. (If unsure, check with Bursar' office. H-106)

Complete form and FAX, MAIL or EMAIL to Registrar's Office:

Fax #201/200-2062 or EMAIL: Registrar@njcu.edu  
Mail: NJCU – Registrar H-214  
2039 Kennedy Blvd.  
Jersey City, NJ 07305-1597

### 1. STUDENT INFORMATION (please print clearly)

\_\_\_\_\_  
Last name First Middle Int.

\_\_\_\_\_  
No & Street c/o or Apt. No.

\_\_\_\_\_  
City State \*Zip Code

\_\_\_\_\_  
Former Name

\_\_\_\_\_  
Last 4 Digits of SSN or Gothic Net ID# (\_\_\_\_\_) Phone #

\*If zip code is omitted or incorrect, delivery will be delayed

### 2. SEND TRANSCRIPT TO: *(please print clearly for mailing or provide the email address)*

\_\_\_\_\_  
Send To: Your Address/Company/Institution or Person

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State \*Zip Code

\_\_\_\_\_  
Send to: Your EMAIL Address

\_\_\_\_\_  
or Sent to: EMAIL Address/Company/Institution/Person

Revised 7/2021

### 3. TRANSCRIPTS REQUESTED

a. Regular Service  
No Fee, Mailed within 4 Business Days

b. Email Transcript

c. Number and Type of Official Transcript(s)

\_\_\_\_\_ # Student Copies \_\_\_\_\_ # 3<sup>rd</sup> Party Copies

### 4. UNIVERSITY ATTENDANCE INFORMATION:

a) \_\_\_ Yes \_\_\_ No Did you complete any courses prior to Fall 1987  
b) By each division indicate year attended and the graduation date(s)

The approximate dates are acceptable.

First Year Last Year

NJCU Undergraduate Division

NJCU Graduate Division

NJCU Occupational Educ. Division

Month Year

\_\_\_\_ Bachelor's Degree awarded \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_ Master's Degree awarded \_\_\_\_\_ / \_\_\_\_\_

### 5. STUDENTS SIGNATURE REQUIRED:

Your signature indicates you are giving NJCU authorization to release your transcript.

\_\_\_\_\_  
Signature & Date

### BURSAR'S OFFICE USE ONLY:

\_\_\_\_ Outstanding balance with NJCU  
Contact Bursar Office H-106

\_\_\_\_\_  
Rec'd by & Date

### REGISTRAR'S OFFICE USE ONLY:

# of Copies sent:

\_\_\_\_ Interdepartmental  
\_\_\_\_ Mailed as requested  
\_\_\_\_ Same Day Service  
\_\_\_\_ Issued to Student  
\_\_\_\_ Total Copies

\_\_\_\_\_  
Sent by & Date