INSTRUCTIONS FOR REQUESTING A TRANSCRIPT

Grace College and Grace Theological Seminary must have a signed request in writing authorizing us to release an academic transcript.

The charge is \$7 per transcript. The appropriate transcript fee must accompany each request. The fee may be paid by cash, check or money order made payable to Grace Schools, or by providing credit card information at the bottom of the Transcript Request Form which includes the credit card number, type of card, expiration date and the name as it is on the card. Transcripts will not be issued for any student who has any indebtedness to Grace.

Grace Schools sends transcripts by first class U.S Mail. **Grace Schools will not fax transcripts.**

Transcripts will normally be processed within 5-8 business days after receipt of the request in our office. **RUSH** orders (processed the next business day after receipt of the request) require a \$20 processing charge in addition to the appropriate transcript fee. A transcript mailed through **OVERNIGHT SERVICES** requires an additional \$20 postage fee per address.

If you are unable to access the Transcript Request Form on the following page, you may request a transcript by writing a letter including the following information:

Current name and any former names

Current address, phone number and email address

Birth date and Social Security number

School attended (college, seminary or graduate school) and approximate dates of attendance

Complete addresses to where you would like the transcript(s) sent Payment for the transcript(s) by check, money order or credit card If paying by credit card, please include the credit card type, complete credit card number, expiration date and the name as It appears on the card

Your signature and the date

You may send your request to us by fax at 574-372-5114 or by mail to:

Grace Schools Registrar's Office 200 Seminary Drive Winona Lake, IN 46590

If you would like **further instructions or have questions** regarding a transcript request from Grace College or Grace Theological Seminary, please call 574-372-5100 Ext. 6418.

Grace College & Seminary Office of the Registrar

Your Signature _

TRANSCRIPT REQUEST

Anecia R. Miller, Registrar/Director of Graduate Admissions

Winona Lake, IN 46590 Phone: (574) 372-5100 ext. 6413 Fax: (574) 372-5114

Student Information				
		S	tudent ID#	
Student's Current Name				
Maiden/Former Name(s)				
				#
Current Permanent Address & Pl	none Number:			
Street	. in			
City			State	Zip
Email Address			Phone #	#
Please circle the Grace school(s)	you attended, circle your	status at the school a	nd give approximate dates	of attendance:
College	Currently Enrolled	l Withdraw	n Graduate	Dates
Graduate School	Currently Enrolled	l Withdraw	n Graduate	Dates
Seminary	Currently Enrolled	l Withdraw	n Graduate	Dates
Transcript Mailing Info	<u>ormation</u>			
Transcript to be processed:	□ Imme	ediately	☐ When final grades from	n current semester are available
# of transcript(s) from	College	Graduate School	Seminary	
☐ To Be Mailed To:				_ □ Student will pick-up
(Complete address required)				
				□ RUSH (next business day)
-				_ □ Overnight
# of transcript(s) from	College	Graduate School	Seminary	
				* *
(Complete address required)	The state of the s			
	G 11	G 1 + G 1 1	G .	_ □ Overnight
# of transcript(s) from	College	Graduate School	Seminary	
☐ To Be Mailed To:				☐ Student will pick-up
(Complete address required)				= 8 (, , ,
				_ □ RUSH (next business day) _ □ Overnight
* Transcripts will not be proces				
Payment Method (addi				Fees:
Cash Amount				
Credit Card Number			Exp. Date	Rush: \$20.00 (+ regular fee)
Please Circle One	MasterCard	Visa	Discove	r Overnight: \$40.00 (+ regular fee)
Name As It Appears on Credi	t Card		Security Code	2
I hereby authorize Grace College	and Seminary to accept t	he payment for and re	elease my academic transcri	ipts.