



Transcript Request

Office of the Registrar • 79 New Montgomery St., 3rd Floor • San Francisco, CA 94105 • Ph 415-618-6454 • Fx 415-618-6273

1. STUDENT INFORMATION

Please note that transcript requests can take up to one week to process.

Last Name _____

First Name, Middle Initial _____

Maiden or Former Name _____

Student ID _____

Social Security # _____

Date of Birth _____

Street Address _____

City, State, Zip _____

Phone Number _____

First Semester at AAU _____

2. TYPE AND QUANTITY

_____ of Official Transcripts: \$10.00 first transcript, \$2.00 each additional transcript on same request

_____ of Unofficial Transcripts: Free

3. FEE

- Pay cash/check/charge card in person
- Mail with check enclosed
- Fax or mail with MasterCard/Visa number

Card Number _____ Exp. Date _____ Amount to Charge \$ _____

Card Holder Name (Print) _____ Card Holder Signature _____

4. METHOD OF DELIVERY

- I will pick up my transcript/s at the Office of the Registrar
- Please mail to the following address/es Check here if additional addresses on reverse

Send ____ copies of my transcripts to:

Send ____ copies of my transcripts to:

5. STUDENT SIGNATURE

Signature _____ Date _____

Registrar's Office Use Only: Processed by: _____ Date _____