



Office of the Registrar

TRANSCRIPT REQUEST FORM – OR COMPLETE REQUEST VIA OASIS TO PAY ON-LINE
Requests using this form - Transcript \$15.00/ea. Overseas and special requests inquire directly.

Last Name	First Name	M.I.	Maiden
Address	City	State	Zip Code
- -	/ /	(Check one below)	(Estimate if needed)
Social Security	Birth Date	___ Attended before 1987* ___ Approximate graduation date ___ Attended 1987 to present	
		* Cannot produce electronic delivery	
Signature to Release		Today's Date	Telephone in case of processing errors

Hold Transcript for Current Grades Hold Transcript for Pending Degree

*****Heidelberg Offers Secure Electronic Transcript Delivery*****

Prefer Electronic Delivery to: sent approximately 24-48 hours during business days; except holidays

Must review list of schools online at https://escrip-safe.com/schools/member_list

() Electronic Network Recipient: _____

Write name of school as appears on the on-line list

If:

School/Recipient not on on-line list...Electronic Deliver to: sent approximately 24-48 hours during business days; except holidays

() Electronically Outside the Network: (make sure they accept electronic transcripts to avoid additional requests/payment)

Name of Recipient _____

Recipient's Email: _____ Confirm Recipient's Email _____

Requestor's email: Electronically sent transcripts ONLY to receive confirmation of sending and receipt:

Email _____ Confirm Email _____

Or: Deliver by Postal Mail: Sent every 5-7 business days during business hours; except holidays

Number of Copies to be sent: _____ Recipient/ University Name _____

Office/Department: _____

Address _____

Number and Street City State Zip Code

Or: Issue to Requestor: Available 5-7 business days during business hours; except holidays

Student Issued Transcripts are marked as Issued To Student: Be certain, if plan to give the requested transcript to a third party, that the transcript "issued to student" will be accepted.

___ Number Copies

() I will pick up in the office

() Picked up by a third party Name: _____

Must show State ID for verification

() Mail to student _____

Name Address City, Zip

We recommend that cash is not sent in the mail. For any returned check, a \$25.00 fee will be charged. Anyone with a Business Office or Loan hold will not have a transcript processed. Please make check or money order to:

Heidelberg University
 Office of the Registrar
 310 E. Market St., Tiffin, OH 44883

Questions:
 registrar@heidelberg.edu
 419.448.2090

Office Use Only
 Processed by _____
 PD ___ HLD ___

