

### Request for Official Transcript for Academic Credit or Employer Verification

Your Full Name *(please print)* \_\_\_\_\_

Your Mailing Address \_\_\_\_\_

List the Programs You Completed and/or the Exams You Passed \_\_\_\_\_

There will be a charge of \$10 for the first original transcript, and \$5 for each additional official transcript requested at the same time on the same request form. A copy of the transcript will be mailed to you for your records. Due to the confidential nature of grade information, the Institutes do not transmit grades by fax or email. Please allow 10 business days for processing.

**Select one option below.**

- Please send my official grade transcript to the address(s) listed below
- Please send my official sealed transcript to my address (shown above). I would like to deliver my transcript to the college personally.
- This transcript will be used to receive cross-credits for the CLU program of The American College. (We will mail the sealed original to you, and you can then mail it to The American College with your application form.)
- This transcript is for an employer's verification. I listed the mailing address below and understand you will send it directly to the name and address I provide.

| Send Official Transcript To: |
|------------------------------|
| Recipient's Name             |
| College/Firm                 |
| Street Address               |
| City/State/Zip               |
| Business Phone               |

| Send Second Official Transcript To: |
|-------------------------------------|
| Recipient's Name                    |
| College Firm                        |
| Street Address                      |
| City/State/Zip                      |
| Business Phone                      |

- Enclosed is my check or money order, made payable to **The Institutes**
- Please charge my:     MasterCard     Visa     American Express     Discover    Postal Code: \_\_\_\_\_
- Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_
- Cardholder's Signature: \_\_\_\_\_ CVV: \_\_\_\_\_

By signing below, I authorize you to release my grade transcript to the recipient(s) listed above.

Sign Here \_\_\_\_\_ Date \_\_\_\_\_