

REQUEST to SEND OFFICIAL TRANSCRIPTS

UNIVERSITY REGISTRAR

UNIVERSITY of CALIFORNIA, IRVINE

Student Information	<hr/>	<hr/>
	Name on UCI records (Last, First, Middle)	Undergraduate Student ID # (if known)
	<hr/>	<hr/>
	Current Name (if different)	Graduate Student ID # (if known)
	<hr/>	Date of Birth: ____ / ____ / ____
	Current Street Address	<hr/>
<hr/>	Phone Number	
City	State	Zip Code
Former Students: <input type="checkbox"/> Update my address on file with the address above. Current students can update their addresses through StudentAccess .		Email Address

Address 1	Send my official transcript to: <input type="checkbox"/> Address below <input type="checkbox"/> Current address listed above		Number of Copies: <input style="width: 40px; height: 30px;" type="text"/> <input type="checkbox"/> Send Now <input type="checkbox"/> Hold for the following: <input type="checkbox"/> Grades <input type="checkbox"/> Degree <input type="checkbox"/> Other (qtr & year) Additional Services add'l charge (see reverse side) <input type="checkbox"/>
	<hr/>		
	Name or Institution		
	<hr/>		
	Street Address		
	<hr/>		
City	State	Zip Code	
<hr/>			
Contact Phone (required for express deliveries)	Contact Email		

Address 2	Send my official transcript to: <input type="checkbox"/> Address below <input type="checkbox"/> Current address listed above		Number of Copies: <input style="width: 40px; height: 30px;" type="text"/> <input type="checkbox"/> Send Now <input type="checkbox"/> Hold for the following: <input type="checkbox"/> Grades <input type="checkbox"/> Degree <input type="checkbox"/> Other (qtr & year) Additional Services add'l charge (see reverse side) <input type="checkbox"/>
	<hr/>		
	Name or Institution		
	<hr/>		
	Street Address		
	<hr/>		
City	State	Zip Code	
<hr/>			
Contact Phone (required for express deliveries)	Contact Email		

Address 3	Send my official transcript to: <input type="checkbox"/> Address below <input type="checkbox"/> Current address listed above		Number of Copies: <input style="width: 40px; height: 30px;" type="text"/> <input type="checkbox"/> Send Now <input type="checkbox"/> Hold for the following: <input type="checkbox"/> Grades <input type="checkbox"/> Degree <input type="checkbox"/> Other (qtr & year) Additional Services add'l charge (see reverse side) <input type="checkbox"/>
	<hr/>		
	Name or Institution		
	<hr/>		
	Street Address		
	<hr/>		
City	State	Zip Code	
<hr/>			
Contact Phone (required for express deliveries)	Contact Email		

I authorize UCI to provide my academic transcript(s) as instructed on this form.

Student signature: _____ Date: _____

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This section is only required if you are requesting additional services with your Official Transcript Request.

Additional Services

Domestic Express Delivery *..... *additional \$25.00* per address

International Express Delivery *..... *additional \$35.00* per address

* Express Delivery is sent via Federal Express or USPS Express mail.

Notary Service *additional \$15.00* per notarization

Payment Information

Payment is made with the Central Cashier's Office.

UCI Central Cashier
228 Aldrich Hall
Irvine, CA 92697-1975

Make checks or money orders payable to: **UC REGENTS.**

*** The Central Cashier **does not** accept Credit/ATM cards. ***

Additional Services Calculator

Domestic Express Delivery

Number of Addresses: _____ X **\$25.00** = _____

International Express Delivery

Number of Addresses: _____ X **\$35.00** = _____

Notary Service

number of notarization: _____ X **\$15.00** = _____

Total: _____

Central Cashier's Validation