



# The National Defense University University Registrar's Office

Email address: [university-registrar@ndu.edu](mailto:university-registrar@ndu.edu)  
JFSC Office email address: [registrar2@ndu.edu](mailto:registrar2@ndu.edu)

## *Transcript Request Form*

Name on NDU records: (L) \_\_\_\_\_ (F) \_\_\_\_\_ (M) \_\_\_\_\_

Former/Current Name (if different than NDU records): \_\_\_\_\_

Student ID Number: (If known) \_\_\_\_\_ DOB: \_\_\_\_\_

NDU college/program attended: \_\_\_\_\_ Attendance Dates: \_\_\_\_\_

Phone number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

Preferred method of contact for any necessary follow-up: (Please note that the URO is unable to make international calls.)

Phone      Email

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### Unofficial transcripts may be faxed or emailed.

Email to: Name:

Email Address:

Fax to: ( )

Attention:

Recipient's Phone Number: ( )

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### Official transcripts may be picked up or mailed, but we cannot email official transcripts. Indicate preferences below:

I would like to pick up \_\_\_\_ copies of my official transcript. I understand the Registrar's Office will notify me by email that the transcripts are ready. The transcripts will be held for five business days and then they will be destroyed.

Please mail (enter number) \_\_\_\_\_ official transcript(s) to the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please mail (enter number) \_\_\_\_\_ official transcript(s) to the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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I authorize NDU to release my academic transcript as instructed on this form. All requests must be authorized by the student's signature in accordance with the National Defense University Privacy Act Statement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_