



ATTN: Transcript Request  
 Office of the Institutional Registrar  
 Nyack College  
 1 South Blvd  
 Nyack, NY 10960  
 Fax (845) 348-3918  
 Phone (845) 675-4732  
 E-mail Transcripts@Nyack.edu

**TRANSCRIPT REQUEST FORM (Please print.)**

Name: \_\_\_\_\_ Name as student: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ E-mail: \_\_\_\_\_

SSN: \_\_\_\_--\_\_\_\_--\_\_\_\_ DOB: \_\_\_\_\_ Daytime contact number: \_\_\_\_\_

**Current status:**

\_\_\_\_ In attendance  
 \_\_\_\_ No longer in attendance  
 \_\_\_\_ Graduated \_\_\_\_\_ (month/yr)

**Nyack program(s) for which transcript(s) should be issued:**

\_\_\_\_ Traditional Undergrad      \_\_\_\_ MSOL  
 \_\_\_\_ ADCP / SADE      \_\_\_\_ MBA  
 \_\_\_\_ ATS (Seminary)      \_\_\_\_ MEd  
 \_\_\_\_ AGSC (Counseling)      \_\_\_\_ Pinebrook Jr College

**Please check:**

\_\_\_\_ Send transcript(s) now  
 \_\_\_\_ Hold for current semester grades  
 \_\_\_\_ Hold for up-coming graduation date

**Dates Attended:** \_\_\_\_\_

**MAIL / FAX (FAX *unofficial* only) TO:** (Put number of each transcript type and addresses and/or FAX numbers – we cannot e-mail.)

1) \_\_\_\_ # of Official      \_\_\_\_ # of Unofficial      2) \_\_\_\_ # of Official      \_\_\_\_ # of Unofficial

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

**Signature (required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FEES / PAYMENT for THIS transcript order (please check one): \*\* No cost for unofficial transcripts.**

\_\_\_\_ **Regular** (in office 5-7 business days – sent regular mail) – \$5.00 1<sup>st</sup> copy/ \$1.00 each additional  
 \_\_\_\_ **RUSH** (in office 1-2 business days – sent regular mail or picked up in office) – \$15.00 1<sup>st</sup> copy/ \$1.00 each additional  
 \_\_\_\_ **RUSH w/FedEx** (in office 1-2 business days – sent FedEx “next business day”) – \$40.00 1<sup>st</sup> copy/ \$1.00 each additional

**Requests may be brought in person, mailed, scanned and e-mailed as an attachment, or faxed.**

**Accounts must be current with Business Office and Perkins loans. Exit counseling for students with Stafford loans leaving Nyack for 1 semester or longer must be completed at [www.edfund.org](http://www.edfund.org) (Click on “EdTest” in upper right) before any transcript(s) will be released.**

**(Circle):** Cash    Check (Made to “Nyack College”)    Money Order    Credit/Debit Card (fill out below)    Total Paid \$ \_\_\_\_\_

Name as it appears on the card: _____			
Credit card #: _____	____	____	Exp. Date: _____
CID# (last 3 numbers on back of card): _____	Type of card (circle):	Visa      Master Card      Discover	

**Office Use Only:** Perkins Loans: \_\_\_\_\_ SFS account: \_\_\_\_\_ Date Sent: \_\_\_\_\_