

LA SIERRA UNIVERSITY

Office of Admissions and Records
4500 Riverwalk Parkway, Riverside, CA 92515-8247

TEL: 951-785-2006 FAX: 951-785-2447

TRANSCRIPT REQUEST

Last First Middle Date

Please print any other name(s) that you have used.

LSU ID/SS Number Number: _____

Tel: _____

Currently attending LSU: Yes No

Other special instructions:

Send this record now

Send after recording current grades

Send after graduation date is posted

Please send ___ copy(ies) of my record to the address below:

Note: All transcripts need release approval
from student financial services.

If transcripts are to be sent to more than one address, use additional forms.

FOR FAX:

Student Financial Services Authorization

Fax Number: _____

To the attention of: _____

Tel # to confirm record received: _____

Loans Authorization

"I realize that the privacy of my information may not be maintained
if transcript is faxed."

Student Signature
(Required on ALL requests)

PAYMENT INFORMATION

Shipping and processing fees:

Regular \$5.00 5-10 Days

Rush \$10.00 48 Hours

FAX \$10.00 48 Hours

ALL FEES ARE NON-REFUNDABLE

Payment method:

Cash

Check: *Payable to La Sierra University*

Credit Card:

Visa ___ Mastercard ___ Discover ___ Other: _____

Credit Card Information:

Name on card: _____

Card #: _____

Expiration Date: _____