

**Submission Instructions**

Please return via mail to the attention of the Office of the Registrar.

**University of the Rockies**  
**Office of the Registrar**  
**555 E. Pikes Peak Avenue Ste. 108**  
**Colorado Springs, CO 80903**

**Tel: 866.621.0124**

**Student Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Student ID (or last 4 digits of SSN): \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name while attending (if different): \_\_\_\_\_ Last Date of Attendance (mm/dd/yyyy): \_\_\_\_\_

Students who provide email addresses will be notified within 1 business day of receipt of this transcript request. After that time, if you provided an email address and have not received email confirmation that your request was received, please contact the Office of the Registrar at the phone number above.

**Request For:**

Official Transcript # OF COPIES: \_\_\_\_\_

There is a transcript fee of \$5.00 per copy for official transcripts. Payment must be made before transcript(s) will be released. Transcripts are released only after all outstanding balances at University of the Rockies are paid in full. Normal processing time is 2-3 business days.

**Special Instructions**

Hold for Final Grades  Hold for Degree Awarded

**Payment Method**

Check is enclosed (Payable to University of the Rockies)

**Send Transcript(s) To:**

Student at the above address  Third party (complete below)

Contact Name: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*I authorize the Registrar's Office to release my transcripts to the indicated party(ies).*

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

**Electronic signature not accepted**