



610 S. Michigan Avenue | Chicago
312.322.1700 | www.spertus.edu

Transcript Request Form

Program MSHSA/MSNM Jewish Studies Other _____

Name _____

Former or maiden name (if different from above) _____

Social Security Number _____ Date of Birth ____/____/____

Address _____

City _____ State _____ Zip _____

Best number at which to reach you _____ Email _____

Please Send Transcript(s) to:

Student Transcript will be sent to the address above.

Other Print complete address below (for additional institutions, please attach a separate sheet).
number

Institution _____

Address _____

Department _____ Attn: _____

City _____ State _____ Zip _____

Preferred Delivery	Processing Time	Each Transcript	Number Ordered	Total Cost	Delivery to
<input type="checkbox"/> mail <input type="checkbox"/> pickup*	Unofficial Transcript Processed in 3-4 Business Days Monday-Thursaday	\$0	_____	\$0	<input type="checkbox"/> Student <input type="checkbox"/> _____
<input type="checkbox"/> mail <input type="checkbox"/> pickup*	Official Transcript Processed in 3-4 Business Days Monday-Thursaday	\$5	_____	\$ _____	<input type="checkbox"/> Student <input type="checkbox"/> _____
<input type="checkbox"/> mail <input type="checkbox"/> pickup*	Official Transcript Processed Next Business Day	\$10	_____	\$ _____	<input type="checkbox"/> Student <input type="checkbox"/> _____
<input type="checkbox"/> mail	Official Transcript Processed Same Day for Delivery Next Business Day – FedEx. <i>FedEx will not deliver to a PO Box.</i>	\$30	_____	\$ _____	<input type="checkbox"/> Student <input type="checkbox"/> _____
				TOTAL	\$ _____

* pickup time available at end of processing time

Payment Options

Check Enclosed. **Send to:** Spertus, Attn: Academic Office, 6th floor, 610 S. Michigan Avenue, Chicago, IL 60605-1901

Cash (**drop off only** – please call **312.322.1726** to schedule) Credit Card (call **312.322.1726**)

Questions? Call academic office at **312.322.1726**

Student Signature (required) _____ Date ____/____/____

No Transcripts will be issued to students whose accounts are past due.

For Office Use Only: Date received ____/____/____ Date transcripts issued ____/____/____ Date transcript filed ____/____/____