

Transcript Request Form

Completed and signed request forms may be submitted by mail to the address below. Please call (509) 963-3047 to check on the status of a request. *Transcript requests will not be processed, nor transcripts released, until all financial obligations to the University have been cleared, including payment for transcripts.*

CWU - Transcripts
400 E University Way
Ellensburg, WA 98926-7465

Student name: _____ Email: _____
 Former name(s): _____ Phone: _____
 Student ID #: _____ Date of birth: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

	Fee	Processing and Delivery Options	Processing Time (business days)	Anticipated Delivery Time (business days)
_____	\$10	Standard processing, standard mail delivery via USPS or pickup.	3-5 days	up to 2 weeks
_____	\$18	Fax copy- <i>This is an unofficial copy.</i>	same day*	1 day
_____	\$18	Expedited processing, standard delivery via USPS or pickup.	same day*	up to 2 weeks
_____	\$25	Expedited processing, express delivery via private company within the U.S. (tracking number provided). Signature required upon delivery.	1 day*	within 7 days
_____	\$35	Expedited processing, express delivery via USPS within the U.S. (allows express delivery to PO boxes and APO addresses).	1 day*	within 5 days
_____	##	Expedited processing, international express delivery (price and delivery time varies by destination country, contact CWU: Transcripts for exact price).	1 day*	varies by destination

*. Depending on the time of receipt, most expedited processing is done the same day, but will be completed by no later than the close of business the following business day.

Attended CWU from: _____ Quarter _____ Year To: _____ Quarter _____ Year

<p style="text-align: center;">Process now: _____</p> <p>Processing hold options (select one):</p> <p style="padding-left: 20px;">Hold for current term grades: _____</p> <p style="padding-left: 20px;">Hold until degree is posted: _____</p>	<p style="text-align: center;">Check here to hold transcript at Registrar: Records desk for pick up (ID required): _____</p>
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Payment options:

Enclose check or money order, payable to CWU, with mailed request form
(do not mail cash and do not include credit card information on the request form)

Send to: _____ Recipient phone #: _____
 Address: _____ Recipient fax #: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

Student signature (required): _____ **Date:** _____