

SETON HILL UNIVERSITY

Official Transcript Request Form

Return this form to: Office of Financial Services and the Registrar
Seton Hill University, 1 Seton Hill Drive
Greensburg, PA 15601

Phone: 724-830-1010
Email: helpfinreg@setonhill.edu
Fax: 724-830-1902

Requests and payments for transcripts received before 1 pm will be processed on the same business day; requests received after 1 pm will be processed on the following business day. Requests will NOT be honored for a person who has a financial hold or another obligation to the University.

SHU ID# _____	OR	SS# _____
Student's Full Legal Name _____		
Former Name _____ <i>(Please provide proof of name change)</i>	Dates of Attendance _____	
Address _____ _____	Daytime Phone _____	
	Email Address _____	

Transcript Should Be Processed:

- Now: Some grades may be missing
 Later: Hold for current semester grades
 Later: Hold for degree awarded notation

Transcript Requested:

- Undergraduate
 Graduate
 Combined (Both Undergrad and Grad classes)
 College in High School/Dual Enrollment
 Total number requested

Where Transcript is to be Mailed: *(Please Print)*

Payment: \$10.00 fee per copy. Make Checks or Money Orders payable to Seton Hill University.

- Cash
 Check or Money Order
 Credit Card: Call 724-830-1010
 Online: www.setonhill.edu/pay
 Additional charge of \$25 for UPS overnight delivery + \$10.00 transcript fee

Only complete the following if transcript is to be emailed or faxed:

E-mail Address Or Fax Number _____
Contact name _____

Transcripts May Not Be Considered Official if emailed or faxed.

Student Signature _____ **Date** _____

**Federal law prohibits issuing a transcript without the student's written permission.*

Office Use Only: **Initials:** _____ **Amount Paid** _____ **Payment Type** _____