

Chestnut Hill College Transcript Request Form ~ \$15 for each copy. ~

Please DO NOT SEND CASH or PERSONAL CHECKS – we accept all major credit cards and money orders/Information: 215-248-7005

Chestnut Hill College Registrar 9601 Germantown Avenue Philadelphia, PA 19118-2623 - Secure email: registrar@chc.edu

Last Name										First Name										Middle Name					
CHC ID# (if known)										Last four of SSN				Any other name(s) under which you attended:											
E-mail										Birth Date						M	M	D	D	Y	Y				
Day #										Cell															

** Please sign here. ** You must sign this request to release your records! Unsigned requests will not be processed!

X

Date: _____

Major/Program:										Did you receive a degree?									
										YES. Enter month/year:				NO. Enter approximate dates of attendance:					

Please <input checked="" type="checkbox"/> :	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Continuing and Professional Studies <input type="checkbox"/> Graduate <input type="checkbox"/> I don't recall.
FedEx Service	<input type="checkbox"/> YES. Do you need FedEx services for an extra charge? Please email registrar@chc.edu to arrange. Charges normally range from \$20-\$75 in addition to the transcript fee (\$15 each). All FedEx orders include tracking information.
Please <input checked="" type="checkbox"/> :	<input type="checkbox"/> Mail my transcript (s) to the recipient(s) below. <input type="checkbox"/> Hold for current semester grades.
	<input type="checkbox"/> Hold for degree conferral.
At the current time, our on-campus operations are limited. All transcripts will be sent by U.S. Mail or by FedEx. In-person pick-up and expedited service are not available. Please allow additional processing time for all requests.	

Recipient #1		# of transcripts to this recipient:	
Name/School			X \$15 each
Address			
Address		= this amount:	\$
City, State, Zip			
Recipient #2 (if needed)		# of transcripts to this recipient:	
Name/School			X \$15 each
Address			
Address		= this amount:	\$
City, State, Zip			
Recipient #3 (if needed)		# of transcripts to this recipient:	
Name/School			X \$15 each
Address			
Address		= this amount:	\$
City, State, Zip			
Total amount due (including any applicable expedited fees)			\$

Money Order made payable to Chestnut Hill College enclosed OR charge the amount indicated to:

Name on card, if different than yours: _____

	M	M	Y	Y	
Credit Card Number	Expiration Date		3- or 4-digit code		

***Normal processing for mailed transcripts is approximately 7 to 10 business days.** All transcripts are paper hardcopies and mailed via US Postal Service except specified FedEx transactions. **PLEASE NOTE:** If there are HOLDS on your account, your request for transcripts will not be processed but will be returned to you.