

Transcript Special Request Form

This form is ONLY for the special transcript requests listed below.

All standard official transcript requests must be submitted online at banweb.pdx.edu.

See www.pdx.edu/registration/transcript-requests for more information.



1. Student Information

Student ID Number		Date of Birth	
Last Name	First Name	Middle Name	Former Name(s)
Current Mailing Address		City	State Zip
Phone Number		E-mail Address	
Years of PSU attendance (please check all that apply): <input type="checkbox"/> prior to 1962 <input type="checkbox"/> 1962-1974 <input type="checkbox"/> 1975-1980 <input type="checkbox"/> 1981-1991 <input type="checkbox"/> 1992-present			

2. Special Request

Select required special request quantity/type (section 2)
AND delivery method (section 3)

Total number of transcripts requested:

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- ☐ **Enclosure** – I have a cover sheet or special enclosure to include with my official transcript.
(please attach enclosure)
- ☐ **Hold** – I have received special permission to override a transcript hold on my record.
- ☐ **Legacy Unofficial** – I attended before 1991 and need a copy of my unofficial transcript.
(no fee for Legacy Unofficial transcripts)
- ☐ **Notary Service** – I need the additional step of having my official record notarized by a notary public.
(additional 2-3 days processing)
- ☐ **Paper Request** – I want to submit my transcript request via paper and do not have one of the special requests listed above.

3. Delivery Method

- ☐ **Pick up in-person** – \$8 per copy + \$10 processing fee
Authorized to Pick Up: _____

- ☐ **Fax** – \$8 per copy + \$10 processing fee
Attention: _____
Fax #: _____
- ☐ **Standard Mail** – \$8 per copy + \$10 processing (1-2 day processing)
Name: _____
Address line 1: _____
Address line 2: _____
City, State, Zip: _____
- ☐ **Domestic FedEx** – \$8 per copy + \$30 processing/S&H fee
(no PO box - physical address only & phone number required)
Name: _____
Address line 1: _____
Address line 2: _____
City, State, Zip: _____
Recipient Phone # (req'd): _____

4. Authorization & Payment

Student Signature - I authorize PSU to release my transcripts to the parties indicated above.



Signature Required – *Unsigned requests will not be processed.*

Date

Payment

- ☐ **Check Enclosed** (payable to PSU)
- ☐ **Visa/MC** _____
Credit Card Number Exp. Date