



- ◇ Requests are generally processed within **5 - 7 business days** after being received by Registrar Services; however, during certain times of year, processing may take longer
- ◇ HSDM does not provide electronic transcripts or verifications; email is *not* a delivery option at this time
- ◇ Requests from students with an outstanding balance or unfulfilled obligation to the University will not be processed

<b>1. Your Information</b>	
First Name _____	Last Name _____ <input type="checkbox"/> DMD <input type="checkbox"/> DMSc <input type="checkbox"/> MMSc <input type="checkbox"/> Certificate Only
<b>Expected Graduation Year:</b> _____	<b>AGE Specialty:</b> _____

<b>2. Service Requested</b>		
<b>Official Transcript</b> Qty: ____  <b>Unofficial Transcript</b> Qty: ____	<b>Enrollment Letter</b> Qty: ____ <small>(enrollment dates, program, &amp; academic standing)</small>  <b>Other Letter/Request</b> Qty: ____ <small>(please explain under Reason for Request)</small>	<b>Form To Be Completed</b> Qty: ____ <small>(please fill out your portion of the form)</small>

<b>3. Delivery</b>		
<input type="checkbox"/> <b>Pickup</b> <small>(you will receive email notification when ready)</small>	<input type="checkbox"/> <b>Mail</b> (standard USPS)	<input type="checkbox"/> <b>Fax</b> (faxed transcripts will be unofficial)
	Recipient Name	Recipient Name
	Company/Institution Name	Company/Institution Name
	Address	Recipient Fax
	City                      State                      ZIP Code	

**3a. Reason for Request:** \_\_\_\_\_

<b>4. Signature</b>	
I authorize the release of my official transcript(s) and/or other requested information to the parties stated above:	
X _____	_____
Signature	Date

**OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_ DATE COMPLETED: \_\_\_\_\_