

LIM College Transcript Request Form

Name: _____
Last, First, MI.

Date of Birth (MM/DD/YY)

Name used while attending LIM College if different from above

Student ID#

Address: _____
Number & Street

City

State

Zip Code

Telephone: _____
Home

Cell

Current Status:

- Presently attending Not attending Semester(s) Attended: From _____ to _____
 Undergraduate Graduate (MBA) Continuing Ed. H.S. Summer Program
 Graduated Degree received: _____ Date: _____

Please indicate where you will be submitting your transcript: _____

Check this box if you would like to **pick up** your Transcript(s). You must bring your LIM College ID or a U.S. Government issued ID the day you pick up your transcript(s).

Mail to: _____

City

State

Zip Code

Please Process

- Immediately
 Hold for final submission of grades Hold for Degree posting
 Fall Spring Summer I Summer II

Reason for request:

- Transferring
 Scholarship
 Other _____

If transferring to another school, please indicate reason:

Transcript Policy:

- **Processing fee of \$5.00 per transcript** paid to LIM College by check or money order **ONLY**. Transcript requests made with cash or without any payment will be returned to the student. There is no fee for transcripts sent for scholarship purposes; however, the transcript must be addressed directly to the scholarship agency.
- All transcripts are sent within **5-10 business days**. Additional time may be required for processing during registration periods and for those students who attended LIM College prior to 1990.
- **All transcript requests must have the student's signature**. Requests without signatures will not be processed and will be returned to the student.
- LIM College has the right to refuse a transcript request. Transcript requests will not be processed and will be returned, if your record reflects a hold or incorrect payment is made.
- LIM College is not responsible for incorrect address or postal delays.

By signing below you agree that you have read this form carefully and have provided all necessary information.

Student Signature: _____

Required to release transcript

Date

OFFICE USE ONLY:

- Cleared by Student Account Transcript Processed on: _____ Transcript Withheld: