



Transcript Request Form

Chaminade University of Honolulu

3140 Waiialae Ave. Honolulu, HI 96816

Records Office

Ph: (808) 735-4722 Fax: (808) 735-4777 Email: records@chaminade.edu

To order electronic transcripts, please visit the following website:

<https://iwantmytranscript.com/chaminade>

STUDENT (CURRENT OR FORMER) INFORMATION:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input checked="" type="checkbox"/> X		
Last	First	M.I.	Authorization Signature (Must be Handwritten; Digital NOT Accepted)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address	Apt. #	City	State/Country	Zip Code	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
SSN (Last 4 digits) OR CID	Birth Date	Phone Number	Former Name(s)		

Transcript Policies:

1. Chaminade will not process this request if information is incomplete or unsigned.
2. Transcripts will not be released to students with account holds due to financial obligations.
3. Transcripts are sent at the request of the student with their authorized signature.
4. Transcripts will not be released to a third party without the written consent of the student.

<input type="checkbox"/> Send Transcripts	<input type="checkbox"/> Instant (In Person)	Number of Copies:	<input type="text"/>
TO:		<input type="checkbox"/> Send Now	
		*** <u>OR</u> (Check all that apply below) ***	
		<input type="checkbox"/> Send after grades posted. Please indicate term:	<input type="text"/>
		<input type="checkbox"/> Send after degree posted. Please indicate type:	<input type="text"/>
		<input type="checkbox"/> Send after SATEP Stamped.	

- Official Copy - On Chaminade Transcript Paper, in a sealed envelope.
- *Unofficial Copy - On White Paper, No Seal. No Charge - Limit 1 per Semester.
- Degree(s) Earned are **NOT** Reflected. Eligible to be mailed or emailed.
*(For Current Students, please access your Unofficial Transcripts via the Web Portal)

*** Please Note: Transcript Fees are based on processing time, NOT mailing time. ***

<input type="checkbox"/> \$7.00/copy - Normal Processing: Within 5 Business Days	Amount Paid
<input type="checkbox"/> \$14.00/copy - Rush Processing: 1 Business Day (Cash <u>or</u> Credit Card Payment ONLY)	<input type="text"/>

Normal Processing: Payments may be made by check, cash, money order, or credit card (VISA, MC, AMEX, DISCOVER)

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name on Card	Credit Card Type	Credit Card Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Security Code	Expiration Date	Billing Address
<input type="checkbox"/> Check if address & ph. # is the same as above.		
Cardholder's Signature:	<input type="text"/>	Phone Number: <input type="text"/>