



Mailed Out Date \_\_\_\_\_

*Transcripts are processed within 5-7 business days from the receipt of the initial request(s).  
During peak times (i.e. registration and graduation), please allow 7-10 business days to process the request(s).*

There is a \$10.00 charge for each copy of your transcript. Payment must be submitted at the time of your request. The Edward Waters College Cashier accepts cash, cashier's checks, money orders, and credit or debit cards; you may pay by phone at 904-470-8199 or 904-470-8247, as well as via online (<https://form.jotform.com/71585645020151>). Request(s) cannot be processed if you have not cleared with the Edward Waters College Office of Student Accounts prior to submitting your transcript request to the Edward Waters College Office of the Registrar. "No individual borrower who has been determined to be in default in making legally required scholarship loan, student loan, or guaranteed loan repayments shall be furnished with his or her academic transcripts or other student records until such time as the loan is paid in full or the default status has been removed (Florida Statute: Title XVIII 1009.95.5)." Loan status may be obtained from the United States Department of Education at 1-800-621-3115.

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial) (Maiden/Previous Name(s))

Address: \_\_\_\_\_  
(Street Address) (City) (State) (Zip Code)

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Are you currently enrolled at EWC: Yes \_\_\_\_\_ No \_\_\_\_\_

Do you plan to attend graduate school? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, where? \_\_\_\_\_

Years Attended EWC: From: \_\_\_\_\_ To: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Month) (Day) (Year)

Did you graduate from EWC? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what year did you graduate? \_\_\_\_\_

\_\_\_\_ Official \_\_\_\_\_ Unofficial  
I would like to order \_\_\_\_\_ copies of my transcript.

Please provide the complete mailing address for transcript(s).

Please process this request (check all that apply):  
\_\_\_\_ Immediately  
\_\_\_\_ After the \_\_\_\_\_ semester grades are posted  
\_\_\_\_ After degree is posted

To obtain (check all that apply):  
\_\_\_\_ I will pick up my transcript (s)  
\_\_\_\_ Please mail my transcript (s)  
\_\_\_\_ I am sending someone else to pick up my transcript(s)

\_\_\_\_\_  
Student's Signature Date

**In accordance with the FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974, as amended, student's academic records are classified as confidential and may not be released to anyone other than the student without the student's written authorization and signature.**

I \_\_\_\_\_ give \_\_\_\_\_ permission to pick up my transcript(s).  
(Requestor's Name) Print (Person Picking -up Transcript(s)) Print

**OFFICE USE ONLY**

Pick-up Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (Print Name) (Signature)

Student Default Balance \_\_\_\_\_/Date Verified \_\_\_\_\_/Initial \_\_\_\_\_

OFFICE OF STUDENT ACCOUNTS ONLY: Student has satisfied all financial obligations. Date Verified \_\_\_\_\_/Initial \_\_\_\_\_