

Request will be processed within 5-10 working days upon receipt in the office and verification of receipt number from the Business Office. For instructions and quicker processing, make your request through the <u>National Student Clearinghouse</u>.

\$10.00 per copy per career level (Undergraduate, Graduate, Doctoral)

Date of Request:	Career Lev	el (U/G/D): _	# of Co	pies	
	-		request for each	a career level)	
Name:	F	First		MI	
Last	Last First		IVII		
Banner Id:	Birth Date: MM	DD	YYYY		
Print ALL last names	since attendance at Faye	tteville State	University:		
Graduation Year/Date	(If Applicable):				
Current Address:					
Receipt Number:	Amount Submitted \$ 672 2605/2117 to pay by credit or debit card and record the receipt				
Please call Cashier at 910 number.	672 2605/2117 to pay by cr	edit or debit ca	rd and record t	ie receipt	
Please mail my trans	cript to this address:				

Signature:

Mail to: Fayetteville State University/1200 Murchison Road/3rd Floor Lilly Building/Fayetteville, NC 28301 Revised 06/2016

Note: Official transcripts will not be furnished until all financial obligations to the University have been satisfied. We do not provide unofficial transcript copies. Please include as much information as possible and write legibly; failure to do so will result in the return of this form.