



Office
of the
University
Registrar
Queen Lane

Transcript Request

Drexel University College of Medicine Use Only

Drexel University
Office of the University Registrar
Queen Lane Medical Campus
2900 Queen Lane, Suite G-27
Philadelphia, Pennsylvania 19129
215-991-8206
www.drexel.edu/registrar

Name (Last, First Middle)												University ID, User ID or SSN											
Name at the time of attendance if different from above:																							
Telephone _____						Email Address _____																	
FEE: \$6 per transcript for individuals NOT currently enrolled Enrollment Status <input type="checkbox"/> Currently Enrolled <input type="checkbox"/> Withdrawn or Graduated						Type of Mailing Service <input type="checkbox"/> Standard (mailed First Class after processing*) <input type="checkbox"/> Expedited – (additional \$25 to arrive Next Business day after processing*)						Dates of Attendance (mmyy) [][][][] - [][][][]			(Expected) Graduation Date (mmyy) [][][][]			Degree (e.g. MD) [][][][]					
*Processing time is 7-10 business days												School Attended <input type="checkbox"/> Drexel <input type="checkbox"/> MCP Hahnemann <input type="checkbox"/> Medical College of Pennsylvania <input type="checkbox"/> Allegheny											
Issue Transcript to:																							
Address Line 1																							
Address Line 2																							
Address Line 3																							
City, State and Zip																							
I authorize the release of _____ copy/copies of my transcript to the party listed in the box above _____												_____ <i>(Signature - required for processing)</i>						_____ <i>(Date)</i>					
Amount enclosed (check or money order payable to Drexel University) \$ _____																							
Select one: <input type="checkbox"/> Process transcript as is <input type="checkbox"/> Process transcript after degree has been posted <input type="checkbox"/> Delay processing until a specific course has been graded. Contact the office once you see the grade in Banner.												___ SOAHOLD ___ OUR Processed ___ NODB ___ Date ___ Fees 02/2008 ver. 1.0											