



APPLICATION FOR TRANSCRIPTION OF CREDIT

(Please print or type)

MAIL COMPLETED APPLICATION TO:

Regis University
SPS Graduate Programs
3333 Regis Blvd., Mail Code M-6
Denver, CO 80221-1099

Phone: 303-458-4300
or 1-800-677-9270

FEES MUST BE PAID WITH RECEIPT OF APPLICATION (FINANCIAL AID NOT AVAILABLE)

Application Fee: \$75.00

Transcribing Fee:

Undergraduate: \$60.00 per credit

Graduate: \$70.00 per credit

Amount Enclosed: _____

Method of Payment:

Check #: _____ Visa MC Discover Amex

Card #: _____ Expiration Date: _____

Full Legal: _____
(Last Name) (First Name) (MI)

Previous/Other Name(s) _____ Name called _____

Date of Birth _____ Social Security # _____

Permanent Address _____
(Street) (City/State) (Zip)

Telephone: Work # _____ Home # _____ E-mail Address _____

Citizenship _____ If non U.S., Country of citizenship _____ Visa Type _____

Employer _____ Title _____

Employer Address _____
(Street) (City/State) (Zip)

Work Telephone # _____ Work Fax # _____

Organization from which transcription credit will be evaluated _____

SIGNATURE _____ DATE _____

OPTIONAL INFORMATION

Ethnic Origin

- Alaskan Native/Am. Indian
- Asian
- African American
- Hispanic
- White Non-Hispanic
- Other

Religion

- Catholic
- Protestant
- Jewish
- Other
- None

Gender

- Female
- Male

Marital Status

- Single
- Married

OFFICE USE ONLY

Regis University is accredited by the North Central Association of Colleges and Schools (NCA) and does not discriminate on the basis of race, religion, color, national origin, handicap, or sex.