

REGIS UNIVERSITY

OFFICE OF THE REGISTRAR

3333 Regis Blvd., A-8 | Denver, CO 80221-1099 | 303.458.4126 | 800.568.8932 | registrar@regis.edu

Transcript Request, Page 2

Requested by (Name): _____

NOTE: Please do **NOT** abbreviate the Name/Organization; it will slow the processing time of your transcript request.

Name/Organization: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Total number of transcripts requested: _____ at **\$14.00** a piece makes the total amount for this request: _____

Name/Organization: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Total number of transcripts requested: _____ at **\$14.00** a piece makes the total amount for this request: _____

Name/Organization: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Total number of transcripts requested: _____ at **\$14.00** a piece makes the total amount for this request: _____