



Request for Official Transcripts and Academic Records Release

Instructions:

- Print the name and complete address of agency/individual to which you authorize the release of your transcript/academic record.
- If you are requesting more than two transcripts, please use an additional form.
- Include a \$5.00 processing fee for each request. Make check or money order payable to “Maryland University of Integrative Health.” Allow 3-5 days for normal processing.
- Include a \$50.00 evaluation fee for transcripts going to the California State Board. Allow 6-8 weeks processing.
- Sign the form. We cannot release a transcript without your signed authorization.
- **All financial obligations to Maryland University of Integrative Health must be met before the request will be processed.**

Student Information Name (please print) _____

Former name (s): _____ Last 4 digits of SSN: _____

Preferred Email: _____ Phone Number: _____

Program: _____

Are you currently enrolled? Yes No Last attended (year): _____

I authorize the release of my transcript/academic records to the following:

Name _____ Attn: _____

Address _____

City _____ State: _____ Zip: _____

Number of copies to be sent: _____

Name _____ Attn: _____

Address _____

City _____ State: _____ Zip: _____

Number of copies to be sent: _____

Special Instructions (check at least one):

- Process Immediately Hold for Current Grades to Post Hold Until Degree Is Posted Include Clinical Hours Report

Signature: _____ Date: _____

Form of Payment

Payment must be submitted with the form for processing.

Credit Card: Visa MasterCard Discover

Name on the card: _____ Card number: _____

Expiration date: _____ Verification Code (3 digits): _____ Cash \$ _____ Check \$ _____