

Transcript Request Form



- Main Campus - WestMed College - San Jose, CA: 3031 Tisch Way, Suite 8PW, San Jose, CA 95128-2561 • Phone: 408.236.1170 • Fax: 408.236.1180
 Branch Campus - WestMed College - Merced, CA: 330 East Yosemite Avenue, Suite 201, Merced, CA 95340-9165 • Phone: 209.386.6300 • Fax: 209.386.6335

Last Name: _____ First Name: _____

SSN: _____ Other name(s): _____ Date of Birth: _____

Home Address: _____

Phone Numbers: Home (_____) _____ Work (_____) _____

PLEASE MAIL TRANSCRIPT(S) TO THE FOLLOWING ADDRESS:

Attn: _____

TYPE OF STUDENT (Please check one and fill out dates)

Current Student **or** Former Student, from ____/____/____ to ____/____/____ Program: _____
mm/yy mm/yy

REQUEST (Please fill out number and subtotals. Payment in advance is required.)

Amount		Subtotals
_____	Number of Official Sealed Transcripts Requested x	\$15 per transcript = \$ _____
_____	Two-Day Rush Delivery x	\$30 per address = \$ _____

PAYMENT METHOD and AMOUNT \$ _____

TOTAL \$ _____

- Check (make payable to WestMed College)
 Money Order

I understand transcripts will not be issued until all financial obligations to the College are cleared _____ (Initial)
I authorize the release of my transcript to the above listed address _____ (Initial)

Signature: X _____

Please mail payment in the form of check or money order to:

National University, Finance: Carla Estrada, 11355 N Torrey Pines Rd., La Jolla, CA 92037

TRANSCRIPT POLICIES

1. Fees: payment by Check or Money Order (payable to: WestMed College)
2. Transcripts are not issued until all outstanding accounts with the college are cleared. Processing will not begin until notification has been received from the Finance Department.
3. Routine requests are processed within 5-10 working days. However, during peak periods (beginning and end of multiple class starts and completions) there will be some delays. Transcripts should be requested four weeks in advance of the date needed.
4. Work-in-Progress Transcript Requests are shown for students who are currently enrolled. Fees are required as described above. At the end of the course, appropriate fees are also required if additional transcripts with final grades posted are requested.
5. Only WestMed College transcripts will be issued and shown on transcripts. Transcripts from other schools are not included and cannot be duplicated. You must apply directly to each school for copies of their transcripts.
6. Use a separate form to designate different recipients. Multiple transcripts to be sent to the same recipient may be requested on a single form.
7. Transcripts are not released without the student's signature. Request by persons other than the student will not be honored without written consent and picture identification from the student.

WestMed College Staff Use Only

Amount Paid _____ Student Accounts Clearance _____ Date Sent or P/U _____ Education Dept. Initials _____ Student ID# _____