

Request for Official Transcript of Academic Records from Northern Illinois University

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City State ZIP Code

PHONE NUMBER _____ DATE OF BIRTH _____
Area Code Number mm/dd/yy (e.g., 05/09/81 for May 9, 1981)

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LAST SEMESTER ATTENDED (select one) Spring ___ Summer ___ Fall ___ Year _____

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PAYMENT IS REQUIRED AT THE TIME OF THE REQUEST

The fee for an official transcript is \$8.00 for each copy. Transcripts may be paid for by check, money order, or credit card (see below). If paying by check or money order, please make it payable to Northern Illinois University.

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SEND ALL REQUESTS TO: Transcripts, Office of Registration and Records, Northern Illinois University, DeKalb, IL 60115-2871. You may fax your request to us at 815-753-0149 or email to regrec@niu.edu as attached PDF