



Official Transcript Request Form

Calvary Chapel University Registrar's Office - 12808 Woodruff Ave,
Downey, CA 90242 Fax# 562-803-7907

There is a \$5 fee for each Official Transcript. Requests to be processed in 5-7 business days.
An additional \$10 fee will be charged for RUSH requests to be processed in 24 hours.

Student Name _____
SSN# _____
Maiden Name _____
Street Address _____
City, State, Zip _____
Phone Number _____
Email Address _____
Quantity of Official Copies (\$5 each) _____
RUSH Official Copies (\$5 each + \$10) _____
Please select method of payment: Check (include with request) Pay Online
Today's Date _____
Dates Attended: _____
Degree Earned: _____

Official transcripts must be sealed and forwarded by the CCU Registrar's Office.
Official Transcripts cannot be faxed.

Please mail transcripts to: _____
ATTN: _____
Address Line 1 _____
Address Line 2 _____
City, State, Zip _____

I authorize Calvary Chapel University to release my transcripts as requested above.

Student Signature

Date

Office Use Only: BO _____ C _____ R _____

DATE SENT: