

Transcript Request Form

To obtain a copy of your student transcript, please send the completed form below to:

Harvard Law School
Registrar's Office – WCC Suite 4007
1585 Massachusetts Ave
Cambridge, MA 02138

TRANSCRIPT REQUEST FORM	
Student ID Number: _____	Approximate Dates of Attendance:
Social Security Number: <u>XXX-XX-</u> _____ (Last 4 digits only)	From: _____ To: _____
Name While Attending: _____	Choose One:
Date of Birth: _____	_____ Send Now
Address: _____	_____ Hold for Posting of Degree/Grades
City: _____	Student Signature: _____
State, Zip: _____	(Must be signed to process request)
Telephone #: _____	Date: _____
E-Mail Address: _____	Transcript fee: For current students or those students who have graduated within the past year, the fee is \$3.00 per official transcript copy. There will be a \$10.00 fee per transcript for all other alumni. Checks, money orders, or cash are accepted methods of payment. Checks should be made payable to Harvard Law School.
_____ Number of copies of <i>Official</i> transcript(s) to be sent to address shown.	Standard shipping will be used on all transcripts requests.
Send Transcript(s) To:	* * * * *
Name: _____	FOR OFFICE USE ONLY:
Address: _____	Date Request Received: _____
Address 2: _____	Transcript Sent: _____
City: _____	Amount: Paid/Due: _____
State, Zip: _____	
<i>*Please note: At this time, we are unable to expedite transcript orders. In addition we are unable to provide in office pick up for transcripts.*</i>	