



RANDALL UNIVERSITY

A FREE WILL BAPTIST COLLEGE SINCE 1959

*formerly Hillsdale Free Will Baptist College (prior to 7.1.16)

REQUEST FOR TRANSCRIPT

1. PLEASE PRINT & COMPLETE THIS FORM.

2. MAIL TO: Registrar's Office
Randall University
3701 S. I-35 Service Road
Moore, OK 73160

FAX TO: 405-912-9050

SCAN & EMAIL TO: registrar@ru.edu

YOUR INFORMATION:

Name _____

Maiden/Former Name _____

Social Security Number _____

Date of Birth _____

Current Address _____

City _____

State _____ Zip _____

Email _____

Phone _____

___ cell ___ home ___ work

Dates Attended _____ to _____

Currently Enrolled? ___ Yes ___ No

TRANSCRIPT REQUEST:

How would you like your transcript sent?

(Check one item below)

___ Pick up at the Registrar's office

___ Mailed as soon as possible

___ Mailed after current semester grades are posted

___ Mailed after degree is posted

NOTE: Send a separate request if you need transcript sent to an additional location.

Identify the office or person to whom this transcript is being sent.

You are responsible for providing the correct mailing address:

Three horizontal lines for mailing address information.

LEGAL SIGNATURE (required) _____ DATE _____

SIGNATURE REQUIRED FOR PROCESSING

PAYMENT INFORMATION:

NOTE: No transcript will be furnished to any student or alumnus whose financial obligations to the University have not been satisfied nor until the transcript fee has been paid.

Transcripts are processed in 3-5 business days.

There is a fee of \$10.00 for each copy.

___ Rush 24-hour turnaround service when available for an additional fee of \$5 per transcript.

Payment options: ___ Cash ___ Check ___ Money Order ___ Credit (VISA/MasterCard)

If using a credit card, please provide the following: ___ VISA ___ Mastercard

Card Number _____ Name on Card _____

Exp. Date _____ Security Code _____ Billing Address _____