



Westmont College Official Transcript Request

Transcripts Are Not Issued Without Financial Clearance From the Business Office

For Business Office questions, please call 877.537.7966 (Toll Free) or e-mail studacct@westmont.edu

First Name:	Middle Name:	Last Name:	
Student ID # (if known):	Last Name While at Westmont (if different):	Date of Birth:	Dates (years) Attended Westmont:
Street Address:		City:	State: Zip:
Daytime Telephone Number:		E-mail Address:	

- Process my request:** Now When grades are posted for current semester When my degree has been posted
- I have attached a document that needs to be included with my transcript.
- I will pick up my transcript from the Student Records Office in Kerrwood Hall.

RUSH AND REGULAR REQUESTS MUST BE ON SEPARATE FORMS

A complete and accurate mailing address is **REQUIRED**.

One address per form

We do not Fax transcripts

REG Qty	REG Amt
<input type="text"/>	\$ <input type="text"/>

Processing Costs:

Regular Processing: \$5 first copy, \$2 for each additional Regular copy requested on all forms submitted at the same time. Allow 5 business days for processing. Delivery method is regular U.S. Mail. Postage is included in cost.

RUSH Qty	RUSH Amt
<input type="text"/>	\$ <input type="text"/>

Rush Processing: \$20 total processing cost per Rush copy. Allow 2 business days for processing. Delivery method is regular U.S. Mail. Postage is included in cost.

Delivery Amt
\$ <input type="text"/>

Delivery Costs: (FEDEX/UPS DO NOT SHIP TO PO BOXES)

Delivery Costs (per request): U.S. Mail: No additional cost **Overnight:** \$25.00 **2-day:** \$20.00
 *FedEx/UPS International: Costs vary by destination, you will be contacted via e-mail for payment authorization prior to processing your transcript request.

TOTAL Qty	
<input type="text"/>	\$ <input type="text"/>

***Phone # of International Destination REQUIRED:**

Total Amount (If necessary, we will adjust the total amount to be consistent with all requests submitted at same time.)

Payment Methods:

May not be billed to student account. **Cash OK in person.**

VISA or MasterCard ONLY

<input type="checkbox"/> Credit Card Number:	Expiration Date:	*Name on Credit Card:
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Personal Check: Please make check payable to Westmont College. You must send a copy of the check with scanned or faxed request form and then mail original check to Westmont along with original request form.

Signature (required)

Date

Your signature authorizes Westmont to release your transcript and charge your credit card.
 *If the card does not belong to the student, a separate signature from the cardholder is **REQUIRED**.

Mail Transcript Request (and check) to:
 Westmont College
 Student Records Office-Transcripts
 955 La Paz Road
 Santa Barbara, CA 93108-1089

Fax Transcript Request (and copy of check) to:
 805-565-7399

E-mail Scanned Request (and copy of check) to:
registrar@westmont.edu