



Manor College
Office of the Registrar
(215) 885-2360

Academic Transcript Request

Manor College Transcript Policies

1. Release of transcript requires the student's signature.
2. **Please allow one week for processing from the date the transcript is received.**
3. Transcripts will not be issued until all outstanding debts to Manor College have been paid in full.
4. Manor College will not be responsible for undeliverable transcripts due to an inaccurate address.
5. Manor College will not duplicate transcripts from U.S. or international high schools or other universities you attended. You must contact those institutions directly.
6. We charge \$5 per transcript (unofficial or official). For rush transcript requests (same day), the charge is \$15.

Name _____ Student ID No. _____

Prior Name _____ Date of Birth _____
If you attended Manor College under a different name, please indicate above. Month / Day / Year

Address _____
city, state, zip

Please check and complete all that apply to you:

- I am a current Manor College student
- I am NOT a current student. The year I last attended Manor College was _____
- I graduated from Manor College: Year _____ Degree _____

Transcript request:

Most universities will not accept a transcript for purposes of awarding transfer credit if it is hand delivered or indicates "issued to student". Manor College recommends that all such transcripts be mailed directly to the university by Manor College.

- I will **pick up** the transcript at the Registrar's Office **OR**
- Hold for current semester grades.
- Hold until my degree is posted.
- Hold until a Change of Grade or Repeat is processed for:
Semester _____ Course No. _____

I authorize issuance of a transcript as indicated on this form.
(Transcript/s will not be processed without your signature)

Signature: _____

Date: _____

Mail to:
Manor College
Registrar's Office/Transcripts
700 Fox Chase Road
Jenkintown, PA 19046

Fax to:
(215) 780-1950

Contact Information

This contact information will be used if there are questions pertaining to your request.

_____/_____
phone number with area code

e-mail address

Please mail to the following:

- unofficial official

Name _____

Address _____

City/State/Zip _____

- unofficial official

Name _____

Address _____

City/State/Zip _____

Registrar's Office use only

Amount Received:

- Check no. _____
- Cash _____
- Date Completed/Mailed _____
- Completed by _____