



Official Transcript Request Form

Office of the Registrar
8401 S. Chambers Road
Parker, CO 80134

Phone: (720) 874-2455
E-mail: registrar@rvu.edu
Fax: (720) 874-2452

Please complete this form to obtain a copy of your official Rocky Vista University academic transcript.
NOTE: Current students may print an unofficial transcript by logging into MyVista.

Date: _____ Student ID: _____ Academic Program: DO BMS PA

Name: _____
Last First Middle or Maiden

Address: _____

Email address: _____

Phone: _____ Birthdate: _____

ORDER DETAILS	QUANTITY	GRADUATION YEAR OR DATES OF ATTENDANCE
<input type="checkbox"/> Process ASAP <input type="checkbox"/> Wait for Final Grades <input type="checkbox"/> Wait for Degree Conferral <input type="checkbox"/> Attached form needs to be sent with transcript	<input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four <input type="checkbox"/> Other: _____	<div style="border: 1px solid black; height: 60px;"></div>

DELIVERY METHOD
<input type="checkbox"/> Pick up from Registrar (please bring RVU Student ID) <input type="checkbox"/> Mail to student's address above <input type="checkbox"/> Email or mail to address below: _____ _____ _____

I understand that any holds currently on my record will prevent the release of my transcript. Otherwise, my official transcript will be delivered via the method selected.

Student Signature: _____ Date: _____

FOR OFFICE USE ONLY	
Date Processed:	Processed By: