

## Transcript Request Form Registrar's Department

St. Matthew's University
11486 Corporate Blvd.
Suite 120
Orlando, FL 32817
Phone – 407-488-1718 / 407-488-1717
Email--registrar@stmatthews.edu

## **Regulation Governing the Issuance of Transcripts**

- 1. Financial obligations to SMU must be met prior to transcripts being released.
- 2. Official transcripts can only be mailed. Unofficial transcripts can be emailed, use a separate form for each recipient or destination.
- 3. All transcripts are \$10 each. NO REQUESTS WILL BE PROCESSED WITHOUT PAYMENT. Credit Card payments can be made online at <a href="www.smuonline.com">www.smuonline.com</a>, checks and money orders can be mailed to address above.
- 4. Allow 3-5 business days for processing once financially approved.

6. All unapproved reques	ts will be voided ខ	after 30 days.		
ALL FIELDS MUST BE	COMPLETED IN	N ORDER FO	R REQUEST T	O BE PROCESSED. Please print clearly
Last name		First Name		Middle
Street Address			·	
City	Sta	ate/Prov	Zip	Country
Phone #		_ Email Addre	ess	
Student I.D. #				
SELECT ONLY ONE:	Mail Official	E-Mail Un	official Uplo	oad to ERAS/AAMC#
SELECT ONLY ONE:	Current Student	Past Stude	nt Graduate	
SELECT ONLY ONE:	Hold for semester grades Hold for conferred degree Not Applicable			
NUMBER OF TRANSCI	RIPTS:	-		
SIGNATURE				
RECIPIENT INFORMA Mailing Address/Fax Num		t clearly.		
OFFICIAL USE ONLY:				