

Transcript Request Form

BEMIDJI STATE UNIVERSITY
Records & Registration Office
Deputy Hall, Room 101, #12
1500 Birchmont Dr
Bemidji, MN 56601
218/755-2020 Fax: 218/755-4409

To Obtain a Transcript:

1. Print all information requested
2. Transcript requests are normally processed within one week from date of request
3. Submit your request:
 - In person (picture ID is required when picking up transcript)
 - By Mail
 - Fax (218) 755-4409
 - E-mail - Records@bemidjistate.edu
(provided a written signature can be included in the request)
4. Requests cannot be taken via phone

Regulations governing issuance of transcript

1. Financial obligations must be satisfied
2. Requests made in person required you to present a valid photo ID
3. Transcripts can only be mailed, never faxed or emailed
4. Request for more than 10 transcripts are subject to a processing fee

Name: _____
Last First MI Previous

SSN or ID#: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ E-Mail: _____

Check only one of the three chooses below:

1. _____ Send Now
2. _____ Send after grades are posted (list term/year) _____
3. _____ Send after degree is posted (list expected graduation date~Mo/yr) _____

Check here if you attended prior to March 1, 1975

Check here if picking transcript up at Records office (Deputy 101) No. of Copies _____

Send To Address #1 No. of Copies _____

Send To Address #2 No. of Copies _____

I give BSU permission to release my transcript to the name and address indicated above. All holds must be cleared before an official transcript is sent. You will be notified by e-mail if your transcript cannot be sent based on a hold. Transcripts mailed to you will be issued in a separate sealed envelope.

Signature: _____ Date: _____

Signature required to send Transcript

Office use only:

MTC _____
Date Sent _____
INT. _____