 **Registry Department**

**(Academic Affairs)**

**Transcript Request Form**

|  |  |
| --- | --- |
| **Name of Applicant:** |  |
| **Matric No.:** |  | **Sex:** |  |
| **Year of Graduation:** |  | **Programme/Department:** |  |
| **College:** |  | **Degree Obtained:** |  |
| **Class of Degree:** |  |
| **E-mail Address:** |  |
| **Purpose for Transcript:** |  |
| **Amount Paid:** |  | **Receipt No.:** |  |
| **Applicant’s Mobile Number:** |  |

|  |  |
| --- | --- |
| **Hard Copy Transcript** | **Soft Copy Transcript** |
| **Name of University/Organization to which transcript is to be sent** | **Name of University/Organization to which transcript is to be sent** |
|  |  |
|  |  |
|  |  |
|  |  |
| **Full Address of Agent/University/Organization** | **Email of Agent/University/Organization** |
|  |  |
|  |  |
|  | **For Transcript Upload** |
|  | **Web Link:** |  |
|  |  |
|  |  |
|  | **ID:** |  |
|  | **Password:** |  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** | Click or tap to enter a date. |

**OFFICIAL USE ONLY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FROM** | **TO** | **DATE** | **NAME** | **SIGNATURE** |
| **ACADEMIC AFFAIRS** | **CSIS** |  |  |  |
| **CSIS** | **ACADEMIC AFFAIRS** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date Printed:** | Click or tap to enter a date. | **Name/Signature:** |  |
| **Date Processed for signature:** | Click or tap to enter a date. | **Name/Signature:** |  |
| **Name/Signature of HOU** | Click or tap to enter a date. |  **Date/Signed:** |  |
| **Name/Signature of Mail Officer** | Click or tap to enter a date. | **Date of sending Transcript:** |  |
| **Courier Company:** |  |  |
| **Tracking Number:** |