

API ADDITIONAL TRANSCRIPT REQUEST FORM



Transcript requests must be made in writing. Transcripts will not be released without the student's signature below; requests by persons other than the student will not be honored. Only students whose balances have been paid in full are eligible to request additional transcript copies. Payment for the transcripts must be received in advance of any mailings. Return this completed form by:

Email: transcripts@apiabroad.com **Fax:** 1-512-600-8999

Mail: Academic Programs International • 301 Camp Craft Road, Suite 100 • Austin, TX 78746

Shipment and Pricing:

Service	Economy*	Standard	Expedited
Mailing method	Standard mail (no tracking number)	Certified mail (tracking number)	Overnight delivery (tracking number)
Cost**	<p>\$10 for the first transcript to each address</p> <p>\$5 for each additional transcript to same address</p>	<p>\$20 for the first transcript to each address</p> <p>\$5 for each additional transcript to same address</p>	<p>\$40 for the first transcript to each address</p> <p>\$5 for each additional transcript to same address</p>
Digital Unofficial Transcripts***	Email transcripts@apiabroad.com Emailed, scanned, and faxed unofficial transcripts are free of charge.		

*Economy service cannot be tracked, so when sending to an institution, it is recommended that you select standard or expedited service. The choice, however, is completely up to you.

**Fees listed apply only to transcripts sent within the United States. Please call API for international shipping fees.

***An electronic copy is considered unofficial by most universities/institutions and is delivered electronically in PDF format. API is not affiliated with an electronic transcript delivery services (eg. National Student Clearinghouse, Scrip-Safe, etc).

Note: Each transcript ordered is individually sealed, accompanied by an API cover letter and a translation page (when necessary).

Student Information:

This form must be completed by the student. Due to academic privacy laws, only a student can request their academic records.

Last Name: _____ First Name: _____

Phone: _____ Email: _____

Study Abroad Program: _____ Term: _____ Host Institution: _____
(City) (i.e. Fall 2019) (Name of university while abroad)

Mail Transcripts to:

Address 1

Recipient Name or University: _____
Attention: _____
Street Address: _____
City/State/Zip: _____

Address 2

Recipient or University Name: _____
Attention: _____
Street Address: _____
City/State/Zip: _____

Number of Copies: _____
 Economy Standard Expedited

Number of Copies: _____
 Economy Standard Expedited

I, the undersigned, authorize Academic Programs International (API) to release my transcript(s) to the address(es) listed above and to charge my credit card \$____ as payment for the release of my transcripts. I agree to pay the amount according to the card issuer agreement.

Signature of the Cardholder

Calculating Your Total:

	Cost
Address 1	
Address 2	
Grand Total	

Payment Method

- Check/Money Order (payable to API)
 Charge my credit card for the amount of _____.

CARD TYPE: Visa MasterCard Discover

CARD NUMBER: _____ CARD SECURITY CODE (3 digits): _____

EXPIRATION DATE (MM/YY): _____

CARDHOLDER NAME: _____

BILLING ADDRESS: _____

CITY, STATE/REGION/PROVINCE, COUNTRY, ZIP/POSTAL CODE: _____
