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Transcript Request Form

Please complete one form for each transcript request unless all transcripts are being sent to the same address.

Transcripts can be picked up at the GUCL Business Office or sent via standard U.S. mail.

GUCL accepts payment for transcripts by cash or check only.

Mail your request and payment to: Glendale University College of Law 220 North Glendale Avenue, Glendale CA 91206

Regular Service\$20.00 per copy (5	business days) Express	Service\$40.00 per copy (24 hour rush
Mr. Ms. Name:		
		LAST
Previous Names Used:		
Address:		
	CITY	STATE ZIP
Day Phone:	Evening Phone:	
Mobile:	Email:	
SOC. SEC. NO.		BIRTHDATE (OPTIONAL)
Graduated: YES NO	Graduation Date:	
Currently Enrolled: YES NO	If no, when did yo	ou last attend?
Please send an official transcript of my		
Name:	NAME OF INDIVIDUAL/INSTITUTION/ CO	MPANY
Address:		
STREET	CITY	STATE ZIP
Signature:		
 Transcripts are not issued unless all outstanding Only Glendale University College of Law transc In accordance with the Federal Educational Rigany information. 	cripts will be issued. Transcripts from other	schools must be ordered from original sources.
For Office Use Only		
Amount Paid for Transcript(s):		Form of Payment: Cash Check
Balance on Account? Yes No	If Yes, Amount:	Approved By:
Date Approved:	Date Transcript Sent:	Sent By: