



MOODY BIBLE INSTITUTE
Chicago & Spokane Campus
MOODY THEOLOGICAL SEMINARY
Chicago & Michigan Campus

TRANSCRIPT REQUEST FORM

Please fill out the form completely. Failure to do so may jeopardize the timely processing of your request.

STUDENT'S NAME _____ TODAY'S DATE _____

NAME WHILE A STUDENT, if different (ie. maiden name) _____

ID# OR SOCIAL SECURITY # _____

IF NOT CURRENTLY ENROLLED, DATES OF ATTENDANCE:

FROM _____ TO _____

CHECK ALL APPLICABLE:

- | | |
|--|--|
| <input type="checkbox"/> UNDERGRADUATE SCHOOL | <input type="checkbox"/> Official copy |
| <input type="checkbox"/> MOODY THEOLOGICAL SEMINARY | <input type="checkbox"/> Unofficial copy (no charge) |
| <input type="checkbox"/> CEU COURSES (ADULT BIBLE STUDY) | |

CAMPUS:

- CHICAGO CAMPUS MICHIGAN CAMPUS SPOKANE CAMPUS DISTANCE LEARNING

NUMBER OF COPIES _____

- 3-5 business day processing time (\$10.00 US dollars per copy, check, cash or credit/debit card)
- "1-2 business day processing time (\$15.00 US dollars per copy, check, cash or credit/debit card)
- Overnight within continental U.S. (\$40.00 US dollars per copy, check, cash or credit/debit card)

Money received over cost is accepted as donation.

FOR CREDIT CARD PAYMENTS: (MasterCard/VISA only)

Card type _____ Card number _____ Exp. date _____

1st Transcript should be mailed to:

Students Address:

Phone No. _____ E-mail _____

2nd Transcript should be mailed to:

3rd Transcript should be mailed to:

- Please Hold – I will pick up transcript Please hold for grade.

STUDENT'S SIGNATURE _____

You may fax your request to:
(312) 329-8987

For more information:
(312) 329-4469

Mail your request to:

820 N. LaSalle Blvd. • Chicago, Illinois 60610-3284 • Attention: Academic Records

Or, scan and email documents to: AcademicRecords@moody.edu