



Transcript Request Instructions



National Defense University - Joint Forces Staff College

Office of the Registrar (SAR)

7800 Hampton Blvd, Bldg SC-1

Norfolk, VA 23503

Phone: (757) 443-6124

(Please **TYPE** or **PRINT CLEARLY** in blue or black ink. Note, illegible requests and/or forms missing information will prevent or delay the processing of the transcript request.)

Instructions: Complete the attached transcript form with all applicable information, sign and email, fax, deliver in person or mail form to the Office of the Registrar (SAR).

Note: The SAR is unable to send faxes to international numbers. NDU - Joint Forces Staff College (Norfolk, VA) alumni must submit all requests directly to the Joint Forces Staff College Office of the Registrar. The JFSC Office of the Registrar can be reached at:

DSN: 646

Phone: (757) 443-6124

Fax: (757) 443-6026

Email: registrar2@ndu.edu

Processing of all transcript requests requires a student signature authorizing the processing of the transcript request. Requests by persons other than the student will not be honored without the student's written authorization and signature.

Transcript requests will be processed and placed in the mail within 5-10 business days of request receipt. Requests made on a business day after the cut-off time will be considered received on the next business day. The SAR business day submission cut-off time is 12:00 PM (Eastern Time).

Once the transcript request is processed, the SAR cannot provide a delivery estimate given the mail routing procedures for all processed requests. The SAR staff are able to provide the date a request was processed, but are limited to that information. If the transcripts have not been received within **20 Calendar Days**, please contact the SAR and the staff will work to assist with your inquiry.

(Please Note: Transcripts mailed to APO/FPO addresses may require additional time to be received. Reference: Section 700 of the USPS DMM)

Request Submission:

In-Person:

- Transcript Requests may be submitted in person by visiting our offices.
- TYPE or PRINT CLEARLY all applicable information on the transcript request form in blue or black ink and sign.
- Deliver the completed transcript request form to the Office of the Registrar (Normandy Hall, Bldg. SC-1 – Room C-108)

Email:

- TYPE or PRINT CLEARLY all applicable information on the transcript request form in blue or black ink and sign.
 - **Note:** The request form can be signed electronically using a digital signature. (Supports the Federal Paper Reduction Act by allowing student to route the request electronically without a need to print and/or scan)
- Attach completed transcript request form to draft email. Address email to the Office of the Registrar at Registrar2@ndu.edu and send.

Fax:

- TYPE or PRINT CLEARLY all applicable information on the transcript request form in blue or black ink and sign.
 - **Note:** The faxed request form does not require a cover letter.
- Transcript Requests may be faxed to (757) 443-6026. (DSN: 646)

Mail (Note: Mailed requests can take 2-3 weeks or more to reach our office depending on when and from where the request was mailed):

- TYPE or PRINT CLEARLY all applicable information on the transcript request form in blue or black ink and sign.
- Mail the completed transcript request form to:



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 7800 Hampton Blvd, Bldg SC-1
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 Email: Registrar2@ndu.edu



Transcript Request Form

Name on JFSC records: (L) _____ (F) _____ (M) _____

Current Name: (if different than JFSC records) _____

SSN or Student ID Number: _____ DOB: _____

JFSC school attended: _____ Years attended: _____

Phone number: (____) _____ Email address: _____

Preferred method of contact for any necessary follow-up (Check only one box below) (The SAR is unable to make international calls):

- Phone Email

Please check all applicable preferences below:

- *Pick up. Number of copies: _____ (*Transcripts will be held for a maximum of five business days following alert of availability)
- Mail... (Indicate to whom and when below)

Mailed Transcript Addressee Information:

Please send (enter number) _____ official transcript(s) to the following address: _____ _____ _____ _____ <input type="checkbox"/> mail now <input type="checkbox"/> after final grades <input type="checkbox"/> after degree posts	Please send (enter number) _____ official transcript(s) to the following address: _____ _____ _____ _____ <input type="checkbox"/> mail now <input type="checkbox"/> after final grades <input type="checkbox"/> after degree posts
Please send (enter number) _____ official transcript(s) to the following address: _____ _____ _____ _____ <input type="checkbox"/> mail now <input type="checkbox"/> after final grades <input type="checkbox"/> after degree posts	Please send (enter number) _____ official transcript(s) to the following address: _____ _____ _____ _____ <input type="checkbox"/> mail now <input type="checkbox"/> after final grades <input type="checkbox"/> after degree posts

I authorize JFSC to release my academic transcript as instructed on this form. All requests must be authorized by the student's signature in accordance with the National Defense University – Privacy Act Statement.

Signature: _____ Date: _____