



TRANSCRIPT ORDER FORM

Mail/deliver to: Lewis-Clark State College Registrar's Office, 500 8th Avenue, Lewiston, ID 83501
Fax: (208) 792-2429 / **Phone:** (208) 792-2223

Current students have access to **unofficial** transcripts via WarriorWeb (<https://warriorweb.lcsc.edu/>).

Former students may obtain an unofficial transcript in person with a photo ID. **Lewis-Clark State College does not mail or fax unofficial transcripts.**

If your name has changed since you attended LCSC, it WILL NOT be changed on your transcript unless you submit documentation (ex. Marriage License. Social Security card, etc.).

First Name	Middle Name	Last Name	Former Name(s)
LCSC Student ID number	Social Security number	Date of Birth	
Street Address or PO Box		City	State Zip Code
Home Phone	Daytime Phone	Currently enrolled? Yes No If NO when did you attend? _____	
I authorize LCSC to send my transcript to the person(s)/organization(s) listed below.			
Student Signature			Date

Transcript Fee Schedule

(Must be paid in advance)

Standard Processing: \$10

Official transcript processed within 5 business days: standard U.S. Mail or held for student pickup.

Rush Processing including Fax: \$25

Official transcript processed immediately for students waiting at counter: For U.S. Mail, or Fax: processed within one business day. Student is responsible to check with the college/organization to determine if they will accept faxed transcripts. Faxed copies sent to the student will be stamped unofficial.

Express Processing: \$35

Official transcript processed on demand ONLY if received prior to 1 p.m.: Delivered overnight to U.S. address only—No P.O. Boxes. No weekend delivery or holiday delivery. Recipient phone number is required.

International Express Processing: \$50

Official transcript processed on demand ONLY if received prior to 1 p.m.: Delivered overnight to most international address — No weekend delivery or holiday delivery. Recipient phone number is required.

Payment Method

- Cash, Check or Money Order**
- Electronic Check**

9 digit Bank Routing # _____

Checking Account # _____

- Visa, Master Card, Discover, AmEx**

Card # _____

Expiration Date _____ **V-Code#** _____

Total Amount: _____

OFFICE USE ONLY: PERC _____ Initials _____

Delivery Method: Standard Paper Fax Pickup Rush Processing
 Express Delivery Int'l Express Delivery

Number of Transcripts: _____ Phone or Fax #: _____

Institution/Business: _____

Department/Person: _____

Address: _____

City: _____ State: _____ Zip: _____

- Process Now Process After Degree is Posted Process at the end of term
- Other _____

Delivery Method: Standard Paper Fax Pickup Rush Processing
 Express Delivery Int'l Express Delivery

Number of Transcripts: _____ Phone or Fax #: _____

Institution/Business: _____

Department/Person: _____

Address: _____

City: _____ State: _____ Zip: _____

- Process Now Process After Degree is Posted Process at the end of term
- Other _____

***** Please print clearly and verify your payment information.*****

Transcripts will not be processed without payment. **For all credit card transaction there is a 2.86% fee.** Credit card account numbers are verified upon submission. Electronic Check bank account numbers are not. Entry of an incorrect checking account number will be rejected by the bank and subject to returned check fees.