

Massachusetts College of Liberal Arts
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Official Transcript Request Form

MCLA policy prohibits faxing transcripts.

Please allow 3-5 days processing or up to 3 weeks during peak processing time.

Total Number of transcripts requested x\$5 per copy

Payment Options

- **Checks:** Mail this form along with a check payable to MCLA
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 - **Banner Self-Service** accounts go to <http://campus.mcla.edu> and then **Self-Service Banner**
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Date _____ **Student Signature (required)** _____

Name _____
Last First Maiden Name (if applicable)

Attendance prior to 1989 (check if yes)

Current Address _____

Student ID: A _____
SSN # _____
Date of Birth _____
E-Mail _____
Phone () _____

Check One

- Process Immediately
- Hold for Grades, Certification, and/or Graduation

Mailing Information

1. If you would like a transcript mailed to the address below please check the box:

New York State Education Department
Office of Teaching Initiatives, Room 5N-EB
89 Washington Avenue
Albany, NY 12234

2. Send Transcript to: above address (please check)

3. NAME AND ADDRESSE(S) to be mailed to: **Please use complete name and address(s)**

1. _____ 2. _____

