

CARDOZO LAW

BENJAMIN N. CARDOZO SCHOOL OF LAW • YESHIVA UNIVERSITY

Office of the Registrar - TRANSCRIPT REQUEST FORM

Please use this form to request your official transcript. Transcript processing typically takes 2-3 business days. At this time, we cannot email PDF transcripts. Students who select the "pick up" option must show their picture ID (driver's license or student ID) upon pick-up.

Name: _____ Student ID # _____

Current Address: _____

Number & Street

City

State

Zip Code

Home Phone # (_____) _____ Cell Phone # (_____) _____

RELEASE TRANSCRIPT:

() As currently recorded () After degree is recorded () Other (please specify): _____

() After grades are recorded for: Fall: _____ Spring: _____ Summer: _____

REASON FOR THIS REQUEST:

() Summer School () Employment () Transfer (please specify which school) _____

() Scholarship () Graduate Study () Bar Exam () Other: _____

COMMENTS: _____

I hereby consent to have my transcript released to the address indicated below:

Signature Date

Delivery Method: Hold for Pickup Mail to Applicant Mail to Address below

Please use this space below to print the Name and Address of the place(s) to which your transcript is being sent. Use reverse side of this sheet if more space is needed.

Please submit all transcript requests via email to cardozoregistrar@yu.edu