

# NORTHERN CARIBBEAN UNIVERSITY

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## OFFICIAL TRANSCRIPT REQUEST FORM

<b>Instruction</b>	
There is a <b>minimum</b> preparation period of fifteen (15) working days, excluding public holidays (JA) on transcript requests. Transcripts will not be released until account is paid in full and will be sent <b><i>directly</i></b> to the Institution/Company.	
<b>Please note the following:</b>	
<ul style="list-style-type: none"> <li>• The first requested copy after graduation is free.</li> <li>• Cost for each copy thereafter is based on the area for submission:                         <ul style="list-style-type: none"> <li>- Jamaica – JA\$500.00</li> <li>- Americas and the Caribbean – US\$15.00</li> <li>- England &amp; Europe – US\$25</li> <li>- Africa – US\$35.00</li> <li>- Far East – US\$40.00</li> <li>- Current Students – JA\$250.00 per transcript</li> <li>- Courier Fee – contact NCU Records (by email or telephone)                              (subject to changes as indicated by courier service)</li> </ul> </li> </ul>	<p style="text-align: center;"><b>Payment Options</b></p> <ul style="list-style-type: none"> <li>• Paymaster/Bill Express A/C# 5166101</li> <li>• NCU Cashier A/C# 5166101</li> <li>• International Money Order Make payable to “Northern Caribbean University”</li> </ul>

<b>Student Information ( Please PRINT legibly in all fields)</b>			
ID Number(s)	First Name	Last Name	
Other names used	Middle Name	Maiden Name	
Course of Study	Major	Minor/Emphasis	
Current Mailing Address			
Telephone (Home)	Telephone (Mobile)	Email Address(es)	
<input type="radio"/> I completed my studies. Date of Graduation _____		<input type="radio"/> I am a current student <input type="radio"/> The period I last attended was _____	
<input type="radio"/> I did not complete my studies. Student's Signature		<input type="radio"/> Semester    Session    Module    Year Date	

<b>Transcript Processing Information (Please PRINT legibly in all fields)</b>		
<b>First Request</b>	<b>Number of Copies</b>	<b>Process Transcript:</b> <input type="radio"/> with current grades
<input type="radio"/> Yes	<input type="radio"/> 1	<input type="radio"/> End of current semester/session/module
<input type="radio"/> No	<input type="radio"/> 2	<input type="radio"/> After Graduation

<b>Transcript Delivery and Delivery Method (please PRINT legibly in all fields)</b>			
<b>Official Copy</b> (bears the University Seal and the University Registrar's Signature)			
<input type="radio"/> Mail Transcript	Name of Individual/Position		
	Institution/Company Name		
	Institution/Company Address		
<input type="radio"/> Fax a copy	Name	Fax #	Verification Number (phone #)

<b>Transcript Delivery and Delivery Method (please PRINT legibly in all fields)</b>			
<b>2<sup>nd</sup> Official Copy</b> (if applicable) bears the University Seal and the University Registrar's Signature			
<input type="radio"/> Mail Transcript	Name of Individual/Position		
	Institution/Company Name		
	Institution/Company Address		
<input type="radio"/> Fax copy	Name	Fax #	Verification Number (phone #)

<b>Personal Copy</b> (Unofficial Transcript bears the University Records Stamp, and the words " <i>unofficial student copy</i> ")	
<input type="radio"/> I will collect my personal copy <input type="radio"/> Mail the personal copy to my current address	

<b>FOR OFFICIAL USE ONLY</b> Financial Clearance (to be completed by the Office of Student Finance)	
<input type="radio"/> Account paid <input type="radio"/> Account not paid <input type="radio"/> Special arrangements made	<input type="radio"/> Transcript may be released <input type="radio"/> Transcript may not be released
Signature of Student Finance Personnel	Date

<b>FOR RECORDS OFFICE USE ONLY -</b>	
Request Received (Date) _____	Request Acknowledged (Date) _____
Correspondence sent regarding: <input type="radio"/> Outstanding balance <input type="radio"/> Incomplete address <input type="radio"/> Insufficient information <input type="radio"/> Missing signature <input type="radio"/> Insufficient payment for this request <input type="radio"/> Other	Notification Medium: <input type="radio"/> Email <input type="radio"/> Phone # _____ <input type="radio"/> Letter <input type="radio"/> Other _____  Notification Date: _____
Transcript: <input type="radio"/> Faxed <input type="radio"/> Mailed <input type="radio"/> Sent by courier _____ Date Sent _____	