Cornell University

Office of the University Registrar
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Transcript Request Form

If you do not have a NetID and/or attended Cornell prior to 1982, please fill out the form below and submit your request via postal mail or fax.
For eCornell enrollment, contact info@ecornell.com.

Personal Information **(All fields are required.)**

Full Name while in attendance	
Address	
City/State/Zip	
Phone	
Email	
Other names used previously	
Student ID	
Date of Birth	
Dates of Attendance	

Please provide a complete destination address for each transcript. If you need additional space, please add additional sheets. **Please limit your request to 10 copies per order.**

Number of Transcripts	**Transcript Destination Address**

By signing this form, you allow Cornell University to release copies of your official transcript to the above listed recipients.

Signature _____
Date _____

Please send your request to:

Office of the University Registrar
Attn: Transcript Department
B07 Day Hall, Cornell University
Ithaca, NY 14853

OR

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