

Transcript Request Form



APPALACHIAN
— SCHOOL OF LAW —
OFFICE OF THE REGISTRAR

1169 Edgewater Drive
Grundy, VA
Fax: (276) 935-8261
registrar@asl.edu

■ Transcript Request Form

Request From: (Fill in the Student's information below)

Full Name :

Maiden or Other Name While Enrolled :

Date Of Birth : Years of Attendance : to
D D M M Y Y Y Y

LSAC Number (If going to LSAC) :

Student Address :

City : State : ZIP :

Email Address : Phone Number :

■ Release

Please Read the following and Sign Below:

Transcripts will not be released for any student with an outstanding balance for tuition, fees, etc., or to any student who owes the school property (keys, etc.).

Transcripts are released only by a signed request from a student.

This document specifically waives your rights under the Family Educational Rights and Privacy Act of 1974, as amended. When executed, it authorizes and permits the Appalachian School of Law to supply any and all transcript information held by ASL to the requested individual(s) or party.

Signature

QUANTITY: OFFICIAL Transcripts

Date of Request

QUANTITY: UNOFFICIAL Transcripts

Please mail OFFICIAL sealed Transcripts to:

Please mail UNOFFICIAL Transcripts to:

Official Transcripts are \$10.00 per copy, and must be prepaid before transcripts are sent. This fee is waived for Bar Exam applications, and for purposes of employment. Please indicate if the transcript is for one of these purposes. No request will be completed without payment if not waived.

If payment is due, you will be emailed an invoice from the Office of the Registrar which must be paid prior to the processing of the transcript.

Purpose of Bar Exam

Purpose of Employment

Invoice Me