

REQUEST FOR TRANSCRIPT

Complete a separate form for each addressee

Fill in all requested data

Print clearly.

Name _____

Name on Record _____
(if different)

ID# or last 4 digits of SS# _____

There is a \$5.00 fee per transcript copy. Fee must be received before transcript will be sent.

Print exact name and address to which transcript is to be sent

Attention:

Signature of Student

Date

Telephone Number

There is a \$5.00 fee for each transcript.

To request via phone: Henry Duncan at 212-625-6072 / hduncan@aii.edu
Or
Daniel Lenzo at 212-625-6083 / dlenzo@aii.edu

To request via mail: Mail this completed form along with a check or money order to:

**The Art Institute of New York City: Registrar's Office
232 West 40th Street, 12th Floor
New York, New York 10018**

To request in person: The Art Institute of New York City: Registrar's Office
232 West 40th Street, 12th Floor
New York, New York 10018