



Request for Academic Transcript(s) From **MICHIGAN JEWISH INSTITUTE**

Student's Name		last	first	middle
Name enrolled under, if different			Enrollment Status (check one)	
Birth Date			day / month / year	<input type="checkbox"/> Degree Program <input type="checkbox"/> Dual Enrollment/ Guest Student <input type="checkbox"/> Year Abroad <input type="checkbox"/> Seminary <input type="checkbox"/> BCM <input type="checkbox"/> MJI Graduate
Social Security No		- -		
Phone / daytime ()		email address		
Phone / evening ()		Dates of Attendance at MJI		
Current Address				
City		State	Postal Code	Country

MJI TRANSCRIPTS ARE ONLY PREPARED FOR STUDENTS WHO ARE CURRENT WITH ALL FINANCIAL OBLIGATIONS.

FEES

\$5 per OFFICIAL transcript

By request, an official transcript may be sent via fax with a follow-up hard copy to the same recipient at no additional charge.

We accept personal checks, Visa or Master Card. Normal processing time is three working days after receipt of request.

Please send my transcript (check one):

- AS SOON AS POSSIBLE
- AFTER MY DEGREE IS POSTED
- AFTER MY GRADES ARE LISTED FOR THE CURRENT SEMESTER
- HOLD FOR _____

MAIL, DELIVER OR FAX THIS REQUEST TO:
MICHIGAN JEWISH INSTITUTE
 ATTN: TRANSCRIPTS
 6890 WEST MAPLE ROAD
 WEST BLOOMFIELD, MI 48322
 FAX: (248) 414-6907

Please (check all that apply): Fax my transcript Mail my official sealed transcript
 I will pick up my official transcript when ready

Most colleges will not consider a transcript issued to a student as an official transcript.

MAIL TRANSCRIPT TO:

(school / company / organization) _____

ATTENTION: _____

Address _____

City _____ **State** _____ **ZIP** _____

FAX Number (optional) () _____ - _____

Student's Signature	Date
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