

Legal Education Institute Registrar's Office

## Request Form for Students/Alumni Legal Education Institute

Student Name (print):		Former/Maiden Name	:
Student ID Number or SSN:		Daytime Telephone: (	)
=	Paralegal Bachelor Degree Legal Nurse Consulting Program	Paralegal Associates Degree	Paralegal Certificate
Currently Enrolled (circle):	YES or NO Graduation Da	te or Anticipated Graduation Date	:
Transcript Request:		Transcript Processing:	
Official Transcript (sealed)		Hold for current term grade release	
To be presented to recipient as is		Hold for degree notation	
Unofficial Transcript (student copy)		Process now	
May be duplicat	ed by student		
Reason for Transcript Requ	uest:Career Development E Graduate/Professional		
Letter Request:Enrollment VerificationLetter of Academic Standing		Address letter to:"To W	hom It May Concern":
Grade Report - /	Indicate Term	Other specifics to include in letter:	
Method to Deliver Reque Pick-up by studer Mail requested ite		individ to Wid  Transo	nscript will be prepared for any lual whose financial obligations ener University have not been met. cripts cannot be emailed or faxed recipient.
Student Signature		Date	
	<del>-</del>	ck made payable to Widener Univer eted form. During peak periods, ad	rsity School of Law is accepted. ditional processing time may be required.
Submit this form in person	or by mail to the attention of the Re	gistrar's Office to the address indic	cated below.
For Office Use Only: Date B	deceived: Amoun	nt Received: Cas	sh or Check #:
Date I	Processed: Proces	sed by:	Form revised on 10/10/07