

## Transfer Applicant Transcript Request Form

**PARCHMENT ORDER REQUEST**

Please provide the following information used during the Parchment account creation process so the Registrar's Office can match this form to your record in Parchment.

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Email Address: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Last Four of SSN: \_\_\_\_\_

**TRANSCRIPT ORDER REQUEST**

Please provide the following order details. If you have more than one recipient, you will need to complete multiple forms.

**Processing Time:** \_\_\_\_\_ Now      \_\_\_\_\_ Hold for Grades      \_\_\_\_\_ Hold for Degree Conferral

**Product Type:** \_\_\_\_\_ e-Transcript(s)      \_\_\_\_\_ Paper Transcript(s)      \_\_\_\_\_ Both

**Transfer Applicant Sending Institution (check all that apply):**

\_\_\_\_\_ Holyoke Community College

\_\_\_\_\_ Springfield Technical Community College

\_\_\_\_\_ Greenfield Community College

**Recipient Name:** Bay Path University

**Recipient Email Address:** admiss@baypath.edu

**Recipient Street Address:** 588 Longmeadow Street, Longmeadow, MA 01106

**TRANSCRIPT ORDER TOTALS & PAYMENT METHODS**

\_\_\_\_\_ Number of **e-Transcripts** being requested      x      \$xxxx each      =      \$\_\_\_\_\_

\_\_\_\_\_ Number of **Paper Transcripts** being requested      x      \$xxxx each      =      \$\_\_\_\_\_

**ORDER TOTAL**      =      \$\_\_\_\_\_

**SIGNATURE**

Please sign below confirming the following statements:

- I understand that this transcript request will not be processed if the requestor is not the student of record, if payment has not been received, or if the requestor has financial obligations to the College.
- I agree to waive my rights under the Family Educational Rights and Privacy Act (FERPA) so any requested transcripts can be released to the above listed recipient.

\_\_\_\_\_

Signature
Date