HAWAII TOKAI
INTERNATIONAL COLLEGE

REQUEST FOR TRANSCRIPT

PLEASE PRINT CLEARLY

NAME:_____
LAST FIRST

DATE OF BIRTH:_____/_____/ _____
month day year

SIGNATURE:_____Date:_____

Are you currently enrolled at HTIC? Yes_____ No_____(graduation date:_____)

SEND TRANSCRIPT TO THE FOLLOWING ADDRESS: (Use back for additional addresses)

Please send transcript(s) to:

Put a number or check next to all that apply:

Send Now_____ Pick up by student_____ Give to OSS Rep. for TES application _____
Send after current term grades are posted_____
Send after degree is conferred_____ last day of attendance_____/_____/_____

Number of transcripts requested: _____

_____Regular copies at $5 each =_____(For pick-up within 7 days or to be sent by regular air mail)*
_____RUSH copies at $10 each =_____(For same day pick-up or mailing within 24 hours)

Postage charges:

For regular air mail within the U.S. there is **no charge** (delivery within 14-21 business days)*
For regular air mail outside the U.S. add **$1.20 per transcript** (delivery within 10-14 business days)**
For Priority mail within U.S. add **$6.45** (delivery within 4-5 business days)
For Express mail within U.S. add **$22.95** (delivery within 2-3 business days)
For Priority mail outside U.S. add **$30.95** (delivery within 7 business days)
For Express mail outside the U.S. add **$59.50** (delivery within 3-5 business days)

Transcript amount due: _____ Postage amount due:_____Total Amount Due: _____

Credit Card Payment (pay in the accounting office first and bring the receipt and this form back to OSS):

Type of CC:_____CC#_____

Exp. Date:_____Name on Card:_____3-digit security code _____

Signature:_____

Email:_____Telephone:_____

Mail request and payment to:
Registrar, Hawaii Tokai International College 91-971 Farrington Highway, Kapolei HI 96707
Email to: studentservices@tokai.edu or fax to: 808-983-4173
For in person payment see the Accounting office on the 1st floor. (Room A119)

FOR OFFICE USE ONLY:

Date of Issue:_____Issued by:_____

(4/2015)