

# Academic Transcript Request

Office of the Registrar  
Bel-Rea Institute of Animal Technology  
1681 South Dayton Street, Denver, CO 80247  
303-751-8700, 800-751-9969, registrar@bel-rea.com

Each transcript costs \$5.00, CASH or MONEY ORDER only. Please print neatly.

Please note that transcripts will not be provided for individuals that have financial or other obligations to Bel-Rea.

Name: \_\_\_\_\_  
First Middle Initial Last

\_\_\_\_\_  
Other legal names (i.e. birth name)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Graduation Date (month/year): \_\_\_\_\_

Last 4 Digits of Social Security Number: \_\_\_\_\_

### Timeframe:

\_\_\_\_\_ Process now.

\_\_\_\_\_ Hold for current quarter's grades/cumulative GPA.

\_\_\_\_\_ Hold until graduation/degree conferred.

# _____ transcripts(s) to this address:
_____
Recipient/Company/Institution
_____
Attention
_____
Street Address
_____
City, State Zip Code

# _____ transcripts(s) to this address:
_____
Recipient/Company/Institution
_____
Attention
_____
Street Address
_____
City, State Zip Code

### For office use only:

Total #: \_\_\_\_\_ Holds: \_\_\_\_\_  
Total cost: \_\_\_\_\_ Paid: \_\_\_\_\_ Date released: \_\_\_\_\_