

New Orleans Baptist Theological Seminary Transcript Request Form

Student's Name _____ NOBTS- Id# _____
Address _____ Telephone _____

Date _____
Signature _____ Dates of Attendance _____

All requests must be cleared with the NOBTS Business Office before they can be issued by the Registrar's office. Current students may not owe more than \$50.00 on their account to have a transcript issued in their behalf. Former students must have a zero balance on their account with the Business Office. Transcripts are \$10.00 per copy. Transcripts requested for NOBTS scholarships are provided at no charge to the student.

- Please check here if you plan to come by the Registrar's Office and pick up your transcript. *If you are requesting a transcript for a scholarship, you may not pick up your transcript. Provide the address below.*
- Please check here if you want your transcript sent by mail. Provide the address where the transcript should be mailed.

Address 1

Address 2

Credit Card Information: VISA ____ MASTERCARD ____ DISCOVER ____
Name (as it appears on credit card) _____ Exp. Date ____ / ____
Card# ____ / ____ / ____ / ____ 3 Digit Security Code _____

Billing Address _____

For Office Use Only

Please check account: Number of copies requested _____ Transcript fee _____
Amount attached _____
Transcript mailed on _____

Please mail to: New Orleans Baptist Theological Seminary, Registrar's Office, 3939 Gentilly Blvd.
New Orleans, LA 70126 (504) 282-4455 ext. 3302 Email: transcript@nobts.edu