

University of North Florida
Professional and Lifelong Learning
NON-CREDIT TRANSCRIPT/CERTIFICATE REQUEST FORM

There is a \$10.00 charge for each digital or printed copy.

Phone: (____) _____ **E-mail address:** _____

Name: _____
(Last) (First) (Middle Initial)

Previous Name: _____
(Last) (First) (Middle Initial)

Current Address: _____

(City) (State) (Zip code)

I would like to order _____ copy(ies) of my transcript/certificate(s).

- ☐ I will pick up my certificate/transcript(s).
- ☐ I am sending someone else to pick up my certificate/transcript(s).*
- ☐ Mail a printed copy of my certificate/transcript(s).
- ☐ Email a digital copy of my certificate/transcript(s).

Please indicate mailing address if different from above: _____

Payment type:

- ☐ Check (mailing address below - check payable to UNF)
- ☐ Money order (same as above)
- ☐ Credit Card: Pay online or by calling PLL Customer Care, 904.620.4200.

*In accordance with the FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974, as amended, a student's academic records are classified as confidential and may not be released to anyone other than the student without the student's written authorization and signature.

I give _____ permission to pick up my certificate/transcript(s).
(This person's ID will be checked.)

Student's Signature _____ Date _____