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DOCUMENT COPYING REQUEST

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UNIVERSITY OF ALASKA FAIRBANKS

Term _____ P ___

Students can request copies of educational documents from their file for **$0.25 per page**.

- Requested copies are stamped unofficial.
- Transcripts from other schools (high school or college) will not be duplicated.
- Only documents allowed by the Family Educational Rights and Privacy Act will be released.
- Document copying requests will be processed as time permits.

Please complete the following information.

STUDENT'S NAME _____ **UA ID #** _____
LAST FIRST M

CURRENT MAILING ADDRESS:

_____
Street & No. or PO Box

_____
City, State, Zip

_____
E-Mail Address

PHONE NUMBERS:

_____
Day

_____
Evening

_____
Cell

Please indicate the name used, if you have attended under another name: _____

Are you currently enrolled at UAF? ☐ Yes ☐ No If not, when were you last enrolled? _____

I hereby request copies of the following documents from my student file:

_____

_____

_____

Total cost to be determined when copies are made.

Payment must be received before copies can be mailed or at time of pick up

Please contact me with the cost by phone ☐ Yes ☐ No

☐ Please mail copies to the address above ☐ I will pick copies up at the UAF Registrar's office.

Student Signature _____ Date _____

Picture ID is required with this form. Verified by_____ Date _____

(If mailed or faxed, an enlarged photocopy of ID with a signature is required.)

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No of pages _____ x .25 = _____ . Paid: Cash _____ Check _____ Visa _____

Processed by _____ Date _____

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