

Miles Law School
P.O. Box 39150
Birmingham, AL 35208
(205) 923-7739
(205) 923-7749 fax

Office of the Registrar
TRANSCRIPT REQUEST FORM

Today's Date

____/____/____

Instructions on completing request form:

1. It is Miles Law School policy that transcripts will be released only when all financial obligations to the law school have been satisfied.
2. Complete this form and return along with a \$15.00 non-refundable transcript fee in the form of a United States Postal or bank money order/cashiers' check made payable to Miles Law School at the above address.
3. Transcripts are mailed directly from the Registrar's Office to the institution or agency named by the student unless otherwise requested.
4. Provide a copy of your driver's license or photo identification.
5. Please allow (7) seven business days to process your request.

Please complete the following: (Please print)

Last Name	First Name	Middle Initial	Name on Previous Academic Records (if different)
Street Address			
City/Town	Zip Code	Current Telephone Number	
Date of Birth	Social Security Number	Year of Graduation	

Mail directly to the following address:

Student Authorization

I hereby authorize Miles Law School to release the transcript of my academic record.

Student's Signature

OFFICE USE ONLY
Money Order Cashier's check Payment submitted in the amount of \$ _____
Number of transcripts requested _____
Account Checked _____
Personal pick up _____
Date Mailed: _____