

How to Order a Transcript

- 1) Go to National Student Clearinghouse at <https://tsorder.studentclearinghouse.org/school/select>
- 2) Enter the school you are ordering **from**. In this case it will be Concordia University—Chicago, click the green “Continue” button at the bottom of the page.

Order a Transcript

Enter the school you want to request your transcript from

Concordia University - Chicago

Concordia University - Chicago

CONTINUE >

3) Read through the notifications on the Concordia University Chicago page, then continue to order your transcript by clicking on the green “Order Transcript(s)” button at the bottom of the page.

4) Enter your personal information as requested. If you do not know your Student ID please enter your Social Security number. After this information is entered, click the green “Continue” button at the bottom of the page.

Enter Personal Information

Personal Information All fields required, unless otherwise indicated

First Name	Middle Name (Optional)	Last Name
Date of Birth MM/DD/YYYY	Has your name changed since attending school?	YES NO

Student Identification Information

One of the following is required

Student ID Dashes are not allowed	Confirm Student ID Dashes are not allowed
OR	
Social Security Number XXX-XX-XXXX	Confirm Social Security Number XXX-XX-XXXX
Are you currently enrolled at Concordia University - Chicago?	YES NO

CANCEL ORDER

CONTINUE

- 5) Next you will need to enter your current address, email, and phone number.
- 6) Indicate “yes” or “no” if you would like receive text message updates on your request
- 7) Indicate “yes” or “no” if you would like CUC to update your record with this information. Once these questions have been answered click the green “Continue” button at the bottom of the page.

Enter Personal Information

Contact Information All fields required, unless otherwise indicated

Address 1

Street number and name or PO Box

Address 2

Building, campus box, floor, apt, suite (Optional)

City

State/Territory/APO

Zip/Postal Code

Country

Email

Confirm Email

Phone Number

(xxx) xxx-xxxx

To receive NSC Msg updates to this phone number, you must Opt-in by selecting 'YES' below. You may receive up to 5 transcript text status updates for each recipient order. Message and data rates may apply. If text messaging is requested, you will receive an Opt-In confirmation message. For help text HELP. To cease messages, text STOP. Texting STOP will stop all text messages to the Opted-In mobile phone number for all existing transcript orders. Do you agree to Opt-in? [Terms of Use and Privacy Policy](#)

YESNO

Allow the school to use this information to update their records?

YESNO

8) Next, you will be asked who the recipient of the transcript is. Choose one of the four options then click the green “Continue” button at the bottom of the page

Select Transcript and Delivery Details

R

College or University

Education Organization, Application Service and Scholarships

Employer or Other

Myself

Schools must obtain the student's permission in order to release information from his or her educational records. The type of consent form that is required is determined by recipient type.

CANCEL ORDER

CONTINUE >

Once you choose your recipient type, if your recipient is not in the predetermined list scroll to the bottom of the page and choose “Not in List”. This will allow you to manually enter your recipient’s information

Select Transcript and Delivery Details

Recipient

All fields required, unless otherwise indicated

According to the Family Educational Rights and Privacy Act (FERPA), in certain instances, schools must obtain the student's permission in order to release information from his or her educational records. The type of consent form that is required is determined by recipient type.

Who are you sending your transcript to?

Education Organization, Application Service and Scholarshi... ▼

Select Organization

USAGA CAS - University of South Alabama Graduate Admissions

UTHSC CAS - University of Tennessee Health Science Center

VMCAS - Association of American Veterinary Medical Colleges

Vermont Agency of Education

William S. Middleton Memorial Veterans Hospital

Not in List

Next, you will be asked to choose the Transcript Processing and Delivery details.

9) Choose when you want your transcript processed (Current-As is = will be processed now)

10) Choose why you are ordering your transcript (this does not impact your order, it is for our own records)

Select Transcript and Delivery Details

Recipient: ALYSSA BANAS

Processing Details All fields required, unless otherwise indicated

When do you want your transcript processed? ▾

Why are you ordering your transcript? ▾

Steps 9 and 10

Delivery Information

11) Choose your delivery type.

** Electronic will be sent as a PDF to the recipient's email, if you are the recipient it will be sent to your email

** Mail: a physical copy of the transcript will be sent through the mail to the address provided

Delivery Information

How do you want your transcript sent? ▾

Electronic

Mail

12) Once you've chosen your delivery type, you will be asked how many copies you want to order. After you chosen your quantity, click the green "Continue" button at the bottom of the page.

Delivery Information

How do you want your transcript sent? ▾

Electronic

How many copies do you want? ▾

1 copy = \$8.00

13) Next, you will provide the delivery information based on the delivery type you chose, then click “Continue”.

****If Electronic you will provide the email address you would like your transcript to be sent to.**

Recipient Delivery Information

All fields required, unless otherwise indicated

Recipient

Recipient Email Address

Confirm Recipient Email Address

< PREVIOUS

CANCEL

ADD TO CART >

****If Mail, you will provide the address you want your transcript to be sent to.**

Recipient Delivery Information

All fields required, unless otherwise indicated

Name of Recipient

Attention

(Optional)

Recipient Country

United States

Address 1

Street number and name or PO Box

Address 2

Building, campus box, floor, apt, suite (Optional)

City

State/Territory/APO

Zip/Postal Code

Phone Number

(XXX) XXX-XXXX (Optional)

< PREVIOUS

CANCEL

ADD TO CART >

14) Next, you will be asked to verify the delivery information.

15) Finally, you will submit your payment information and then submit your request.