



Diocese of Springfield in Illinois

Catholic Pastoral Center • 1615 West Washington • Springfield, Illinois 62702-4757
www.dio.org (217) 698-8500 Fax: (217) 698-0802

Office for Archives and Records Management

Transcript Request

Transcripts will only be released directly to the student or to an institution of their designation. Transcripts will be mailed within ten business days.

A \$10.00 non-refundable processing fee and a clear photocopy of an official photo ID (photo ID must include signature) are required with all transcript requests.

Required Information:

Name of School: _____

Student's Full Name: _____

Maiden Name (If applicable): _____

Email or Telephone Number: _____

Year of Graduation or Withdrawal: _____

Date of Birth: _____

Number of Transcripts Requested: ___ Official Transcript(s) ___ Unofficial Transcript(s)

Pick-up or Mail (Pick One): ___ I will pick-up my transcript from the Catholic Pastoral Center.
___ Mail my transcript.

(If Mailing) Send Transcript To (please include name of institution if applicable):

Signature for Release of Transcripts _____

Date _____

Pursuant to Federal Law 93-380, this personal information is transferred only on the condition that you will not permit any other party to have access to such information without the written consent of the student. Having so transferred such information, the Diocese of Springfield in Illinois disclaims further responsibility.

Please mail requests and payment to:

Diocese of Springfield in Illinois
Attn: Archives
1615 W. Washington
Springfield, IL 62702