Alaska Commission on Postsecondary Education

P.O. Box 110505
Juneau, Alaska 99811-0505
Toll Free: (800) 441-2962 • TDD: (907) 465-3143
In Juneau: (907) 465-2962 • Fax: (907) 465-5316
acpe.alaska.gov

Transcript Request

Instructions: Complete the information below to request a copy of your transcript from a closed Alaska postsecondary institution. Mail or fax the signed form to ACPE at the address above, or scan and email it to ACPE@alaska.gov. The academic record will be sent within 5-10 business days of the date the completed form is received. If the transcript has been archived, please allow an additional five business days for delivery.

PART I: Student Information

Name: _____

Name(s) used while attending school: _____

Daytime phone number: _____ SSN: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____ Email: _____

PART II: Closed School Information

Name of Institution: _____

City where school was located: _____

PART III: Send Transcript To (student may request multiple delivery methods)

Choose one or both of the delivery methods below:

☐ School or employer address (indicate below) ☐ Student address above (includes a student copy and a sealed official copy)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Fax Number: _____

PART IV: Certification

By signing, I certify under penalty of perjury that all information I have provided is true to the best of my knowledge, and that I am the person named on the requested transcript.

Signature: _____ Date: _____