



## ST VLADIMIR'S ORTHODOX THEOLOGICAL SEMINARY

575 Scarsdale Rd, Yonkers, NY 10707 • [www.svots.edu](http://www.svots.edu) • 914-961-8313 • fax 914-961-4507

# Request for Transcript

Requests for official transcripts, bearing the seminary seal and the Registrar's signature, **must be signed** and mailed or emailed to Gabrielle Russin, Student Affairs Administrator. The fee is **\$7 per transcript**. Transcripts are normally processed in 5-7 business days and sent by normal mail, unless "pick up" or expedited delivery is requested. Students who request expedited processing will also be charged the cost of special mailing.

*Note: Transcripts will not be issued, however, until the student has met all outstanding financial obligations to the seminary.*

Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

First Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Email: \_\_\_\_\_

Former Name(s): \_\_\_\_\_

Student ID Number: \_\_\_\_\_

### Dates of Attendance:

From: \_\_\_\_\_ To: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Mail to: \_\_\_\_\_ Pick up: \_\_\_\_\_ # Requested: \_\_\_\_\_

Name

Mail to: \_\_\_\_\_ Pick up: \_\_\_\_\_ # Requested: \_\_\_\_\_

Name

Address Line 1

Address Line 1

Address Line 2

Address Line 2

City

City

State / Country

Zip / Postal Code

State / Country

Zip / Postal Code

Signature: \_\_\_\_\_

Date: \_\_\_\_\_