The Sage Colleges Transcript Request Form

Failure to include all information may result in a delay in processing.

Student ID# or Last 4 digits of SSN	Former Name(s)
Name (Last, First, M.I.)	Date of Birth (MM/DD/YYYY)

Address	City	State	Zip Code

E-mail Address	Telephone Number

Student Signature *(Required)*	Date

All financial obligations must be satisfied before transcripts are released.

☐ **Official** ☐ **Unofficial**

Approximate Dates of Attendance:

☐ Russell Sage College	☐ Sage Junior College of Albany
☐ Sage College of Albany	☐ Sage Evening College
☐ Sage After Work	☐ Sage Graduate School

Transcript Processing Service

☐ Send Now	☐Hold for Current Semester Grades ___/___
☐ Rush *	☐Hold for degree conferral ___/___

Send transcript(s) to:

Number of copies for this address:	Number of copies for this address:
Number of copies for this address:	Number of copies for this address:

☐ Pickup Number of copies:_____ Campus (*circle one*) ALBANY TROY

FEES: Standard: $5.00 per copy (5-7 working days)
*Rush: $35.00 plus cost of each transcript (1-3 working days)

☐ First Class Mail-no charge ☐ USPS Priority Mail-$5.00
☐ USPS Express-$14.40 ☐ UPS Next Day Air-$25.00

Method of Payment ☐ Check ☐ Money Order

Number of Transcript(s) Requested:_____ Total Transcript Fee: $_____

Mail your request to: Office of Student Services The Sage Colleges 140 New Scotland Avenue Albany, NY 12208	**Office Use** _____ Total Copies Requested $_____ Received Mailed: _____ Date: _____