



Inter American University of Puerto Rico

Office of the Registrar

ACADEMIC TRANSCRIPT REQUEST

VAAE - REG 110 (06/2023)

Father's Surname		Mother's Maiden Surname		First Name		Initial			
Identification Number		Telephone Number		Email		Date of Birth		Number of Copies	
						Month Day Year			
Send: <input type="checkbox"/> Immediately <input type="checkbox"/> At the end of current session				Mailing Address:				Date of Graduation	
								Month Year	
								Starting date of studies IAUPR	
								Month Year	
Degree Attained:				Campus:		<input type="checkbox"/> I want only the following level of studies to be included: _____ (see Instructions)			
Sent Transcript to: (Use block letters)								Official Use	
						Student's Signature Month Day Year			

INSTRUCTIONS

1. This request must be presented at the Bursar's Office for payment and further processing.
2. If you want only one level of studies in your transcript, select the box assigned for this and specify the level. **Technical Certificates (T), Associate Degree (A), Bachelor's Degree (B), Professional Certificate (P), Master's Degree (M), Doctor's Degree (D).**
3. A separate application must be completed for each addressee.

NOTE

The academic transcript is a confidential and private document. Copies of the transcript will be issued only at the request of the student. Official copies of the transcript will be sent directly by Inter American University to the institution or agency designated by the student. The University does not consider transcripts issued directly to the student as official copies.