



COLUMBIA COLLEGE

Tysons Campus
8620 Westwood Center Dr.
Vienna, VA 22182
TEL. 703-206-0508

DOCUMENT REQUEST FORM

Form 030-006
Rev. 04/23

Students requesting academic records, certificates or other school issuance documents must complete this form and submit to the Registrar office.

1. Student & Program Information:

Student Name: Last First Middle

Student ID: Date of Birth: Month Date Year

Address: Street City State ZIP

Phone: () Email:

Status of student (Check one): Country of Citizenship:

U.S. Citizen Permanent Resident F1 / J1 / M1 Other (Specify)

Enrolled Program: Certificate Degree

Program Start Date: Program End Date:

2. Documents Requested: (Check one):

Number of Copy

Transcript x \$15.00 = \$

Letter of Enrollment x \$15.00 = \$

Tuition Statement x \$15.00 = \$

Student ID x \$15.00 = \$

I-20 Re-issue x \$50.00 = \$

Mailing Service Fee - Envelope x \$15.00 = \$

Mailing Service Fee - Documents Envelope x \$20.00 = \$

Other x \$ = \$

Express Service Request (must be received prior to 1:00 PM) x \$10.00 = \$

Total Amount Due: \$

Reason/purpose for requesting:

*All documents are generally issued within 5-7 business days after we receive your written request and payment.

**All documents expire after 90 days of the request date and will be destroyed after the expiration date.

3. Signatures Required:

Student Signature: Date: Month Date Year

For Office Use Only

Representative's Name/Signature: Date: Month Date Year

Processed by:

Registrar's Name/Signature: Date: Month Date Year