



Official Transcript Request Form

Please select the campus you attended:

- College for Professional Studies, Boca Raton
- Kaplan Continuing Education, Ft Lauderdale
- Delta Career Institute, Beaumont
- Hickok Technical Institute, Cleveland
- JPS Institute of Health Careers, Fort Worth (John Peter Smith)

This transcript request form is specifically for College for Professional Studies, Kaplan Continuing Education, Delta Career Institute, JPS Institute, and Hickok Technical Institute (including their former names). If you attended a different institution listed on the closed college website, you must go to www.kaplan.com/closedcolleges/ to place your order online.

Student Information (Print legibly):

Name _____ SSN _____

Name when attending _____ Date of Birth _____

Email address _____ Program _____

Dates/Years of Attendance _____ Student ID (CPS) _____

Degree/Diploma received/date (if applicable) _____

Please send **ONE** official transcript of my academic records to the following:

Business/University/Name: _____

Department or Division: _____

Address: _____

Please fax a **copy*** of the transcript of my academic records to the following number:

*Please note that the term "Official Transcript" generally refers to a transcript mailed in a sealed envelope direction from the education institution to the requested recipient. Thus, a faxed copy of a transcript may not suffice for all transcript request needs.

I hereby authorize the release of my transcript as defined above

Signature _____ Date _____

Please email the completed form to closedcollegeinformation@kaplan.edu or fax to 1-800-882-9519.
 Kaplan Higher Education, Attn: Closed College Records, 900 North Point Pkwy, Suite 250, Alpharetta, GA 30005
www.kaplan.com/closedcolleges