



Scan and Email the completed transcript request form with your receipt to alana-mari.richards-lett@open.uwi.edu for processing. Please ensure an email address is stated for the applicant and the institution.

THE UNIVERSITY OF THE WEST INDIES

OPEN CAMPUS

EXAMINATION UNIT

GORDON STREET, ST AUGUSTINE, TRINIDAD AND TOBAGO, W.I.

Telephone: (868) 645-8645 Fax: (868)645-8645; Email: gordon.street@open.uwi.edu

TRANSCRIPT REQUEST FORM

Student ID# _____ Date of Birth _____ Email _____

I am/was in attendance at The University of the West Indies, Open Campus (formerly School of Continuing Studies) under the name:

Mrs/Miss/Mr _____

Programme: _____ Period: _____ I graduated [] I did not graduate []

Programme: _____ Period: _____ I graduated [] I did not graduate []

STUDENT COPY [] Number of copies _____ OFFICIAL COPY [] Number of copies _____

PLEASE PRINT THE NAME AND MAILING ADDRESS OF THE INSTITUTION/UNIVERSITY

1.	2.
Fax#:	Fax#:

Please process this request:

[] by deadline date _____ [] after grades are declared official [] after degrees are posted

To obtain:

- [] I will collect my transcript/s [] Please mail my transcript/s to me in a sealed envelope
- [] Please Fax (Fax charges apply) [] Please send via Courier Service (Courier charges apply)
- [] I have included an attachment [] Please mail my transcript/s to the Institution/ University above

I authorize _____ to pick up my transcript/s.

Please note that there is a charge of TTD\$40.00 (local) and/or TTD\$50.00 (foreign) for each transcript.

(Signature)

(Date)

My mailing address is:

(OFFICIAL USE ONLY)

1.	Paid(\$):
	Receipt #:
	Date:
Tel#:	Signature:

Note: Five (5) working days to process all transcript requests