



## ORDERING AN OFFICIAL TRANSCRIPT IN PERSON

Official Transcript/Diplomas can be ordered in person by going into your local Cortiva Institute Campus and submitting a completed Official Transcript Request Form. If a Transcript Request Form is submitted to a campus other than the campus you attended, we will forward your request to the campus you attended to be processed.

## ORDERING AN OFFICIAL TRANSCRIPT BY MAIL, FAX OR EMAIL

Official Transcripts can be ordered by mail, fax or email by sending in a completed Official Transcript Request Form to the campus you attended. Campus information is listed below. For email submission, please email transcript requests to [SEGTranscriptRequest@steinerleisure.com](mailto:SEGTranscriptRequest@steinerleisure.com)

*NOTE: Student academic records are classified as confidential and may be released only with the student's authorization, in accordance with the Family Educational Rights and Privacy Act of 1974. Unsigned requests will not be processed.*

*\*It can take up to 10 business days to prepare and send an official Transcript/Diploma.*

## CHARGE FOR TRANSCRIPT

There is a \$5.00 charge per Transcript and/or Diploma that is requested. Cash, Check or Credit Cards (excludes American Express) are acceptable forms of payment. Note: There is no charge for transcripts being sent to FSMTB (Mblex).

*\*Express Mail, Certified Mail, etc. is available upon request. Any additional costs for the services will be charged to the student/graduate.*

## CAMPUS LOCATION INFORMATION

Ô [ :câçæå ] • cîc~c^ÉACE|î } \*c [ ] ÅÔæ { ] ~ • Å 808 W Interstate 20É Suite 100É ArlingtonÉ TexasÅÅ76017Å Ç682DÅ999É3150Å ÅðæçÇ682DÅ999É3132Å  
Ô [ :câçæå ] • cîc~c^ÉÅÓæ|çá { [ ] ÅÔæ { ] ~ • Í FÍ ÅÚ ; [ \* | ^ • • ÅÖ | ä ç ^ É Å Ú ~ ä c ^ Å C E É S É Å S i } c @ ä & ~ { É Å T æ : | æ } ä Å Å G F E J E Å ( I F E D Å Í H Î É Î J G J Å Å ç Å Ç I F E D Å Í H Î É Î Í Í Å  
Ô [ :câçæå ] • cîc~c^ÉÅSä } \*Å [ - Å Ú : ~ • • äæ ÅÔæ { ] ~ • G F F Å Ú [ ~ c Å Ö ~ ] ] @ Å Ú [ æ ä É Å S ä } \*Å [ - Å Ú : ~ • • äæ Å Ú ^ } • ~ | ç æ } ä Å F J I E Í Å I I D Å Í J E F I E E Å Å ç Å Ç I F E D Å Í H Î É J E Í F Å  
Ô [ :câçæå ] • cîc~c^ÉÅÔ : [ { , ^ | ÅÔæ { ] ~ • Å I Í Å S @ ~ } ] ä \ Å Å Road Suite Å F E É Ô : [ { , ^ | ÅÔ [ ] } ^ & ç ä & ~ ç Å E Í F I Å Å I I E D Å Í Î É F Î Í Å Å ç Å Ç I I E D Å Í Î É G F Í Í  
Ô [ :câçæå ] • cîc~c^ÉÅU : | æ } ä [ ÅÔæ { ] ~ • G Í E E Å S æ \ Å S ~ & ä ^ } Å Ö | ä ç ^ É Å Ú ~ ä c ^ Å F I E E Å T æ ç | æ } ä É Å Ö | [ ] ä æ Å H G Í Í F Å Å I E Í D Å G Í F E E H F J Å Å ç Å Ç I E Í D Å G Í F E E H I G Å  
Ô [ :câçæå ] • cîc~c^ÉÅÚ [ { ] æ } [ ÅÔæ { ] ~ • G E E F Å Y É Å Ú æ { ] | Å Ú [ æ ä É Å Ú c ^ Å F E E Å Ú [ { ] æ } [ Å Ö æ & @ É Å Ö | [ ] ä æ Å H H E Í I Å Ç J Í I D Å J Í E Í I E E Å Å ç Å Ç J Í I D Å J Í E J Í H H Å  
C [ :câçæå ] • cîc~c^ÉÅV æ { ] æ D Ü Ç É Å Ú ^ c ^ Å Ô æ { ] ~ • Å Ç H Í E Å H I c @ Å Ú c : ^ Å ç Å Þ [ : c @ É Å Ú Ç É Å Ú ^ c ^ Å ! • ä ~ ! \* É Å Ö | [ ] ä æ 33713 (727) 865-4940 Fax (727) 545-0053



**REQUEST FOR OFFICIAL TRANSCRIPT OR DIPLOMA:**

Campus Attended: \_\_\_\_\_ Program: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name while attending school: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Class Number: \_\_\_\_\_ Start Date: \_\_\_\_\_ Grad Date: \_\_\_\_\_

Student Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Student Signature: \_\_\_\_\_

**MAIL DOCUMENTS TO:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**ADDITIONAL INSTRUCTIONS/DOCUMENTS NEEDED:**

Are you using these transcript(s) for licensing purposes? Yes No if Yes, Which State? \_\_\_\_\_

If ordering multiple copies, do you need each transcript sealed in separate envelopes? Yes No

Additional comments you need us to know about your request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Transcript(s) \_\_\_ @ \$5.00 each = \$\_\_\_\_\_

Additional mail service requested = \$\_\_\_\_\_

Total = \$\_\_\_\_\_

**OFFICE USE ONLY**

\* - A2 \$ 2026 21

\* - A2 ! - F: 2; A! ?<02@@21

\* - A2 \$ 20<?1 @! ?<02@@21

After payment is =?<02@@21, =- F: 2; A6 3-? - A6; / 29; D @OBA @5721121 ` <?A6- /; @OBA 2 1<2@; <A@A-?2 =- F: 2; A6 3-? - A6; .

Mastercard  Visa  Discover

Acct# \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV#: \_\_\_\_\_

Signature: \_\_\_\_\_