



Requests are generally processed within **5 - 7 business days** after being received by Registrar Services;
However, during certain times of year, processing may take longer and last minute requests may not be honored.

- ➡ **We do not provide electronic transcripts or verifications; email is not a delivery option at this time.**
- ➡ **Completed request forms may be faxed: **617-432-3881** or emailed: Registrar_Services@hsdm.harvard.edu**
- ➡ **Transcript requests should be mailed, along with payment. See [Transcript Payment Information](#)**

Please Provide Your Information:

First Name

*Last Name

**Indicate any other name(s) used while an enrolled student, if applicable (i.e. maiden name, legal name change).*

Email Address

Phone #

Which program were you enrolled in:

☐ DMD ☐ DMSc ☐ MMSc ☐ Certificate Only

Indicate certificate track/specialty: _____

Did you complete the program: ☐ Yes ☐ No

Graduation Date: _____

You are requesting the service(s) below for the purpose of:

SERVICE:

Official Transcript

Qty: ____ x \$3.00

Graduation Verification Letter

(letter includes enrollment dates and degree and/or certificate awarded)

Qty: ____ no fee

Form(s) To Be Completed

(make sure to fill out your part of the form and include it when submitting this request.)

Qty: ____ no fee

DELIVERY OPTIONS:

Check at
least one
option

*We do NOT
send ANY
documents
via email.*

Fax

☐

(faxed transcripts are not considered official)

Pickup from Registrar Services

(you will be notified via email when document(s) is ready)

☐

Mail via Standard USPS

☐

Please use this space for special instructions or information:

Transcript Payment Information

There is a \$3 fee per transcript, per program. Full payment must be received before transcripts will be mailed— *No Exceptions*.

HSDM does not accept credit cards at this time.

Checks/money orders should be made payable to **HSDM** and mailed to:

**HSDM Registrar Services
Attn: Transcript Request
188 Longwood Avenue
Boston, MA 02115**

Fax To:

Company/Institution Name

Recipient Name

Recipient Fax and Phone #

Mail To:

Company/Institution Name

Recipient Name/ Attention To

Address

City

State

ZIP Code

Information regarding official transcripts and letters: Registrar Services will not process any requests from students who have an outstanding balance or unfulfilled obligation to the University. Official Transcripts contain coursework attempted by the student, is printed on secure University transcript paper and includes the Registrar's signature and School seal. Transcripts sent directly to alumni/former students will be stamped "Transcript Issued to Student". Depending on the program and years of enrollment, a transcript may not be available; therefore, a special graduation verification letter is available in place of the transcript. Graduation verification letters indicate program, dates of enrollment and degree and/or certificate awarded.

By signing below, I authorize the Harvard School of Dental Medicine to process my request and release my official transcript(s) and/or other requested information to the parties stated above:

X

Signature

Date