



Request for Academic Records

Part I (To be completed by student)

Instructions: Please complete the information below for Part I of this form. Print and sign the form. Submit to the authorized Academic Records unit for your university (usually the Registrar's Office or Controller of Examinations).

Surname/Family Name

NIES ID #

Given Name

Date of Birth (MM/DD/YYYY)

Name of School/Institution

Country

Start _____

End _____

Period of Attendance (MM/YYYY)

Degree/Program

Date Conferred (if applicable)

I authorize the above mentioned school/institution to release my documents to NASBA International Evaluation Services.

Student Signature: _____

Date: _____

Part II (To be completed by institution)

Instructions: Authorized Academic Records personnel, complete in the information below for Part II of this form. Please sign and stamp each page of the academic record. Include the completed form along with the student's academic records in a university-sealed envelope.

Name and Title of Authorized Personnel (please print)

Name of School/Institution

Contact Email

Contact Phone

Degree Earned (if applicable)

Date Conferred (if applicable)

Authorized Signature: _____

Date: _____

Please post documents to the address below. Electronic submissions can be accepted from a verifiable university email address (Public domains such as @yahoo.com, @126.com, @hotmail.com, etc. are not considered verifiable).

NASBA International Evaluation Services
150 Fourth Ave North, Suite 850
Nashville, TN 37219
USA

email: nies@nasba.org
toll free: 1.855.468.5382
local: 1.615.277.9077