



STUDENT ACTION REQUEST

OFFICE OF THE REGISTRAR
 POST OFFICE BOX 8104 ✦ 300 COLLEGE STREET, NORTHEAST
 ORANGEBURG, SC 29117-0001 ✦ (803) 536-7185 ✦ FAX: (803) 536-8602

Please Print Clearly:

Campus Wide ID	Name (Last, First, M.I.)	Work Telephone
E-mail Address	Mailing Address (Street, City, State, Zip)	Home Telephone
Student Signature (Required)		Date

Service Requested? Please mark all boxes that apply:

- Grade Problems Graduation Registration Residency Course Descriptions
- Overnight Express Fax Re-ordering Diploma Mailing Diploma
- Academic Review Board Enrollment Verification Veteran Certification
- Transcript Problems Other (please explain) _____

Attendance Information

Institution	Dates (Month/Year)		Degree(s) Awarded If Applicable	Date Awarded (Month/Year)	
	From	To			

Special Instructions or Remarks

_____ _____ _____

Processed By:	Date:
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SERVICE FEES

FEES ARE SUBJECT TO CHANGE.

Transcripts \$10.00	Faxes \$5.00	Duplicate Diploma \$50.00	Course Description(s) 1 – 3 courses \$ 2.00 4 – 6 courses \$ 4.00 7 – 9 courses \$ 6.00 10 – 12 courses \$ 8.00 US Postal Service Overnight Mailing (U.S. Destinations only) \$13.95
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Holds <input type="checkbox"/> Yes <input type="checkbox"/> No Type _____	Date Received	<input type="checkbox"/> Cash <input type="checkbox"/> Check	Amount Received	Initials/Cashier
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Please provide a mailing address for forwarding the materials requested. Print clearly in the area provided.
