



UNIVERSITY  
of HAWAII

# HILO TRANSCRIPT FORWARDING REQUEST

Office of the Registrar / 200 West Kawili St. Hilo, HI 96720-4091 / Student Services Center, First Floor Rm 101 / Phone: (808) 932-7447 / Fax: (808) 932-7448 / E-mail: [uhhro@hawaii.edu](mailto:uhhro@hawaii.edu)

### Instructions:

- This form is to be used to request that copies of transcripts from non-UH institutions be forwarded to a UH System Admissions/Registrar's Office for admission purposes only. **One recipient per form.**
- The original non-UH transcript will remain at UH Hilo.
- Due to FERPA rules, students cannot receive copies of non-UH transcripts from UH Hilo.

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
Last First MI

Email: \_\_\_\_\_@hawaii.edu Phone: \_\_\_\_\_

**Please forward copies of my previous educational records to the UH System campus indicated below.**

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

### List previous educational institution(s):

_____	_____
Name of institution	City/State or Country
_____	_____
Name of institution	City/State or Country
_____	_____
Name of institution	City/State or Country
_____	_____
Name of institution	City/State or Country

### Choose one recipient:

- |  |   |
|--|---|
| <input type="checkbox"/> UH Manoa Undergraduate Admissions Ofc | <input type="checkbox"/> Hawaii Community College                   |
| <input type="checkbox"/> UH Manoa Graduate Admissions Ofc      | <input type="checkbox"/> Honolulu Community College                 |
| <input type="checkbox"/> William S. Richardson School of Law   | <input type="checkbox"/> Kapiolani Community College                |
| <input type="checkbox"/> John A. Burns School of Medicine      | <input type="checkbox"/> Kekaulike Information & Service Ctr (KISC) |
| <input type="checkbox"/> UH West Oahu                          | <input type="checkbox"/> Kauai Community College                    |
| <input type="checkbox"/> UH Maui College                       | <input type="checkbox"/> Leeward Community College                  |
| <input type="checkbox"/> UH Maui College, Molokai              | <input type="checkbox"/> Windward Community College                 |

**Method of Delivery:** If no method of delivery is selected, transcript will be sent by mail.

Mail     Fax     UH File Drop    Recipient Email: \_\_\_\_\_

### FOR OFFICE OF THE REGISTRAR USE ONLY:

Date sent: \_\_\_\_\_ Initials: \_\_\_\_\_