


Educational Organization Recipient

- * Organization Name:
- * CAS Transcript ID: 

Transcript Type And Purpose

- * Transcript Type:
- * Transcript Purpose:

Delivery Options

- * Delivery Method:

**Please confirm, the delivery option you selected means:
Transcript will be sent by Electronic Exchange (ETX).**

- * **Checking this box confirms you have read the delivery method information above.**

- Name of Recipient:
- Attention:
- * Quantity:

Additional fees may apply. The total fees will be displayed in the order summary.

Attach Additional Documents

- Additional Documents:

Optional: Select upload to add documents (Maximum: 3) to your transcript request

Supported format(s): PDF,DOC,DOCX,JPG,JPEG

File name(s): Permits alpha numeric characters and non-consecutive periods, dashes, underscore and spaces

Processing Timeframe

- * Processing Option:

[Cancel Changes](#)