

The National Hispanic University

Request for Official Transcripts

Requesting Official transcripts from The National Hispanic University is a two-step process. Your request will not be considered complete until both steps in the process have been completed. Please see the instructions below. If you have questions at any time, you may contact 1-877-762-9801 or nhuregistrar@nhu.edu and someone will assist you.

Instructions:

Step 1 – Transcript Payment

To submit payment for your transcript order, please go to <https://easypath.ecsi.net/NHU/878/Epay?pid=872> . Please complete the online form, which includes a secure payment process. At the end of the transaction, you will receive a confirmation number. Please capture this confirmation number so that it can be included on the transcript request form.

Step 2 – Transcript Request Form

Please complete the attached transcript request form. Please note that this form requires a physical signature and the payment confirmation number. Please return the form using one of the options listed below:

Mail:

Laureate Education, 650 S. Exeter St, Attn: Registrar's Office 7th Floor, Baltimore MD 21202

Fax:

410-843-6416

Email:

nhuregistrar@nhu.edu

We look forward to receiving your request!

The National Hispanic University

Request for Official Transcripts

Contact Information

Call: 1-877-762-9801

Email: nhuregistrar@nhu.edu

Fax: 410-843-6416

Mail: Laureate Education,
650 S. Exeter St, Attn: Registrar's
Office 7th Floor, Baltimore MD 21202

Instructions:

1. Please complete all required information on the form along with a physical signature
2. Allow 5-7 working days to process. This does not include mail time.
3. Official transcripts fees are subject to change and are as follows:
\$4.00 per copy \$8.00 rush order (3 working days)
\$10.00 Emergency (2 working days)
4. Transcripts will not be released until all financial obligations to the University are met.
5. Please no P.O. Box addresses

Student Information (please print):

*Student Name: _____ NHU ID: _____

*Student Address: _____
Street City State Zip

*Email Address: _____ *Daytime Phone: _____

*Last Four Social Security Number: _____ Date of Birth (mm/dd/yyyy): _____
(* indicates required information)

Clearly print the name and complete mailing address (including Zip Code) for transcript delivery. Use boxes on next page for additional delivery addresses, if necessary. Please, no P.O. Box addresses.

Delivery Information:

Name: _____

Street: _____

City: _____ State _____ Zip/Province _____

Number of Copies to this address: _____ Standard Mail \$4 per copy _____ x \$4 = _____

Rush Mail \$8 per copy _____ x \$8 = _____

Emergency Mail \$10 per copy _____ x \$10 = _____

Total Charge = _____

Student Signature* (required): _____ Date: _____

***This form requires a physical signature**

Payment Confirmation Number* (required): _____

