Northrise University

TRANSCRIPT CORRECTION FORM

This form should be completed if you are requesting for a correction on your official transcript from the University. The form must be accompanied by the stipulated processing fee as indicated in University documentation for the current academic Year. (Note: Students will not be charged if a correction is indeed necessary).

A. Student Details (please print in CAPITAL LETTERS)

Last Name: _____ Matriculation ID: ☐☐☐☐☐☐☐

First Name: _____ Contact Telephone: _____

Address 1: _____ Address 2._____

P.O Box: _____ Email: _____

Are you currently enrolled in classes at Northrise?

☐ Yes ☐ No, I last attend in Term: _____of Academic Year: _____

If "Yes", please indicate the Program Name: _____

B. Transcript Correction Details

Please correct the following information on my transcript:

C. Student Signature: (required for processing): _____ Date: _____

Office Use Only

TRANSCRIPT CORRECTION PAYMENT	
Payment Amount: K_____	Comments on requested corrections:
Date:	
Received By:	Corrected/Checked By:
Signature:	Signature: Date: