

Transcript Request Form

Request for Official & Unofficial Transcripts



Fees for Transcripts: \$10.00 - Official
\$15.00 - Official/Rush
No Charge - Unofficial/Member
\$5.00 - Unofficial/Non-Member

STUDENT INFORMATION

Name: _____ Maiden Name*: _____

Home Address: _____ *Needed only if classes were taken under this name.

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Bank Name & City that you are/most recently were an employee at: _____

Social Security #: _____ / _____ / _____

I took AIB/MBA classes during the year(s) of: _____

Type of Transcript(s) being requested:

- Unofficial Copy
 Official Copy – will be sent directly to the college or employer

Send Unofficial Copy to:

Address below Fax Email

Send Official Copy to:

Name: _____ College/University: _____

Address: _____ Attn: _____

_____ Address: _____

City: _____

State: _____ Zip: _____ City: _____

Fax: _____ State: _____ Zip: _____

Email: _____

I hereby authorize the release of my AIB/MBA transcript to the individual and/or entities above.

Signature: _____ Date: _____

Please check payment type: Check Enclosed

Visa/MC _____ Exp. Date _____

Name on Card _____

Signature of Card Holder _____

Submit form and payment (if applicable) to Minnesota Bankers Association, Attn: Chris Harrison at the address below: