

Instructions for Sending Transcript/Marksheet Request Forms to Institutions Abroad

Queens College of the City University of New York requires that all applicants submit complete official transcripts/marksheets of all postsecondary education. To be considered official, these documents must be sent directly from the institution to the Office of Graduate Admissions at Queens College. Please use the attached Transcript/Marksheet Request Form(s) to request documentation from institutions outside the United States.

Carefully follow the instructions below to avoid delays in having your official documents sent to Queens College. Because your application is *incomplete* until all official documents are received, failure to comply with these instructions will hold up the processing of your application.

Please print all information, except where a signature is requested. It is a good idea to keep photocopies of all forms that you send.

The following information must be filled in on the Transcript/Marksheet Request Form(s):

- Name of the institution you attended
- Your full name as it appears on your grade report (If your present name is different, print it in parentheses as an addition.)
- Your Student ID Number, gender, and date of birth
- Dates you attended the institution
- Any additional information that may be required or helpful (for example, exam number, seat number, roll number, date of exam, faculty, or department)
- Your **signature** (do **not** print) and the date of the transcript request
- Your present address

If a fee is charged for the transcript, be sure to send it along with your request.

Address your envelope(s) and registered air mail receipt(s) as follows:

- For all countries except Bangladesh, India, or Pakistan: to the Registrar or applicable office.
- For Bangladesh, India, or Pakistan: to the name of the issuing institution (i.e., send it to the university).

Send your request by **Registered Air Mail** directly to the *appropriate office* of each institution you attended abroad as soon as possible, and **keep the Postal Receipt** as proof that your request was sent. (You will need this proof if the institution does *not* send the requested documentation.)

Queens College will *not* mail the request for you. **It is your responsibility to forward the required request form(s) to the institution(s) attended. The Registered Air Mail Receipt must be completed in English** with the appropriate information as indicated in the example shown on the reverse side of this instruction sheet.

One month after you send your first request form(s) by registered air mail, you should submit a **second request**, whether or not you have received confirmation from the institution(s). After you send the second registered air mail request, you may bring photostatic copies of your original transcript(s)/marksheet(s) and copies of all your registered air mail receipts to the Office of Graduate Admissions, or mail photostatic copies of all registered air mail receipts and legible copies of your complete original transcript(s)/marksheet(s) to:

Queens College, CUNY
Office of Graduate Admissions, JH 105
65-30 Kissena Boulevard
Queens, NY 11367-1597 USA

The submission of **two registered mail receipts (dated one month apart)** for each institution attended with photostatic copies of all documents does **not** guarantee that your application will be processed. All decisions regarding official or unofficial documentation and the processing of your application are at the discretion of the Director of Graduate Admissions.

Transcripts, marksheets and/or other educational credentials that have been altered in any way will NOT be accepted.

PREPARING A REGISTERED AIR MAIL RECEIPT

Obtain a Registered Mail Receipt from the Post Office and **print** the following information in the areas shown below:

- ① Your name
- ② Your home address
- ③ Your city/state/ZIP code
- ④ Name of institution
- ⑤ Applicable office or board
- ⑥ Mailing address

REGISTERED NO.		POSTMARK		
To Be Completed By Post Office	Reg. Fee \$	Special Delivery \$		
	Handling \$ Charge	Return Receipt \$		
	Postage \$	Restricted \$ Delivery		
	Received by			
To Be Completed By Post Office (Please Print) All Entries Must Be In Ballpoint or Typed	Customer Must Declare Full Value \$ <input type="checkbox"/> With Postal Insurance <input type="checkbox"/> Without Postal Insurance			
	<div style="border: 1px dashed black; width: 100px; height: 100px; margin: 0 auto;"></div> <p style="text-align: center;">Domestic Insurance Is Limited To \$25,000; International Indemnity Is Limited (See Reverse)</p>			
			FROM	①
				②
				③
				④
				⑤
⑥				
TO				

The Post Office will stamp the receipt in this area when you mail the forms.

PS Form 3806, April 1991

RECEIPT FOR REGISTERED MAIL

The receipt MUST be completed in ENGLISH!



Office of Graduate Admissions
Jefferson Hall Room 105 | 718-997-5200

Transcript/Marksheet Request

To: Registrar, _____
(Name of institution attended)

From: The Director of Graduate Admissions

The person whose signature appears below is an applicant to a graduate program at Queens College, City University of New York. To determine this candidate's eligibility for admission, we must evaluate all documents concerning the student's entire academic record while at your institution. **Official copies** of these documents must be **mailed directly to our offices** at the address shown below. Please include a transcript (official attested university marksheets, relevés de notes, notas, index grade report, etc.) **in the original language** (along with an English translation, if possible) of the courses/subjects taken and marks received semester by semester and year by year. **Please return this form** with the documents you send. We greatly appreciate your assistance in this matter. Our mailing address is:

Queens College, CUNY
Office of Graduate Admissions, JH 105
65-30 Kissena Boulevard
Queens, New York 11367 USA

Please print all information except for signature.

Name _____
(Print full name as it appeared in your academic record at the institution you attended.)

Student ID Number _____ Date of birth _____
Month Day Year

Gender Identity: ☐ Male ☐ Female ☐ Transgender ☐ Gender nonconforming
☐ Nonbinary ☐ A gender not listed ☐ Not specified

Dates of attendance: From _____ To _____
Month Year Month Year

Other Information (if required) _____

Certification: I hereby authorize the release of my academic record to the Queens College Office of Graduate Admissions. Please mail official copies of all pertinent documents directly to the address shown above. Thank you for your cooperation.

☐ I have enclosed the required fee for the documents.

Signature _____ Date _____

Address _____
Number and street Apt. # Town or city State ZIP code