

Please send your signed and completed form via fax to 800-473-2512 or via email if using secure service to transcripts@learninghouse.com

Please note: Some institutions may require the student to obtain transcripts directly; if this is the case, your enrollment counselor will contact you.

King University: Transcript Release Form

TRANSCRIPT RELEASE AUTHORIZATION

I authorize my official transcripts to be sent to King University C/O The Learning House and allow any necessary follow-up to acquire said transcripts listed below.

Applicant's Signature: _____ Date: _____

Legal Name: _____
First Last Maiden other

Permanent Address: _____
Street City State Zip

Date of Birth: ____ - ____ - ____ Social Security Number or Student ID Number: ____ - ____ - ____

Phone _____ Email _____

1. Institution Name: _____

Mailing Address: _____
City State Zip

Dates Attended From: _____ to: _____ Degree Earned/ Program Seeking (if any): _____

2. Institution Name: _____

Mailing Address: _____
City State Zip

Dates Attended From: _____ to: _____ Degree Earned/ Program Seeking (if any): _____

3. Institution Name: _____

Mailing Address: _____
City State Zip

Dates Attended From: _____ to: _____ Degree Earned/ Program Seeking (if any): _____

Have more schools for us to request? Please use additional sheets.

Return official transcript materials to:

King University
C/O The Learning House
801 East Park Drive, Suite 105
Harrisburg, PA 17111

Or email if using secure service transcripts@learninghouse.com

Institution Records Office: If you cannot process this request please contact the Transcript Office at 800-293-7075 ext. 175