



HORIZON UNIVERSITY

Official Transcript/Certificate of Enrollment Request Form

2040 S. Brea Canyon Rd #100, Diamond Bar, CA 91765 Phone: 909-895-7138 Fax: 909-895-7143

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

This is new contact information. Please update my record.

Please check the box for your request

Official Transcript Number of copies: _____

Certificate of Enrollment (Attendance Letter) Number of copies: _____

• Reason for the request:

• Delivery Options:

- Standard mail
- Express mail (US only - \$40.00 extra charge)
- Hold for pick-up

Please send copies to:

Recipient	Address
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

I hereby consent to have my transcript/certificate of enrollment released to the recipient(s)/address(es) on this form.

Signature: _____

Date: _____