

OFFICIAL TRANSCRIPT REQUEST for NABP Upload

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Office of the Registrar

Main Campus
Rocket Hall, Room 1800
Mail Stop 322
Toledo, OH 43606
Phone: 419.530.4844
Fax: 419.530.4828
Transcripts@utoledo.edu

College of Pharmacy and Pharmaceutical Sciences Doctor of Pharmacy Program

- **Please complete this form and forward to Transcripts@utoledo.edu to request release of your academic transcript to the National Association of Boards of Pharmacy.** All coursework at The University of Toledo will be included.
- Your academic transcript will be uploaded only after your degree has been posted.
- It is your responsibility to verify there are no transcript holds on your account. Please check the myUT portal at <http://myut.utoledo.edu> or inquire at Rocket Solution Central or the Health Science Campus Student Service Center if you are unsure of the status of your account.
- Do not use the online transcript service for submitting your transcript to NABP.
- Your transcript will be uploaded only with your written authorization.

Student Information/Authorization

Rocket ID Number

Name (Last, First Middle)

Street Address

City/State/ZIP

Phone

Personal E-Mail (for contact purposes)

Your transcript cannot be released without your signature.

I affirm that I am the above-named student. In compliance with FERPA, I hereby give my written consent and authorize The University of Toledo to release my academic record to the National Association of Boards of Pharmacy.

X _____

Date: _____

Your official transcript will be forwarded to the College of Pharmacy and Pharmaceutical Sciences for uploading to the National Association of Boards of Pharmacy.