

# DIVERS INSTITUTE OF TECHNOLOGY

## TRANSCRIPT AND CERTIFICATION ORDER FORM



**STUDENT INFORMATION –All required to identify your record (please print clearly)**

DIT Class (if known) \_\_\_\_\_ Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Full Name (Last, First, Middle) \_\_\_\_\_  
 Current Address \_\_\_\_\_ Country \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone# \_\_\_\_\_ Email \_\_\_\_\_

**A. I would like to order**

	# of Copies	Fee
<input type="checkbox"/> Academic Transcript	_____ copy(s)	\$10.00/copy
<input type="checkbox"/> Diploma	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> Diploma card (wallet size)	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> Rigger card	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> JSA card	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> NDT Magnetic Certification	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> NDT Ultrasonic Certification	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> OSHA/HAZMAT Certification	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> First Aid / BLS card	_____ copy(s)	\$25.00/copy
<input type="checkbox"/> CPR / First Aid card	_____ copy(s)	\$25.00/copy
<input type="checkbox"/> Perfect Attendance certificate	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> Outstanding Achievement in Welding certificate	_____ copy(s)	\$5.00/copy
<input type="checkbox"/> Copy of complete record	_____ copy(s)	\$0.15/page

**B. Indicate processing time (select one)**

- Standard Service—3-4 weeks..... \$0.00  
 Expedited Service—3 business days ..... \$50.00  
**Expedited Service is only available for classes 101-03 or later.**

**C. Indicate delivery method (select one)**

- SHIPPING  
 UPS 2<sup>nd</sup> Day Shipping ..... \$15.00  
 UPS Next Day Shipping ..... \$30.00  
 UPS International ..... call DIT for price  
 FAX  
 Domestic ..... \$5.00/FAX number called  
 International ..... \$10.00/FAX number called

**D. Payment instructions (select one)**

- Email Order:** Call Student Accounts at 1.800.634.8377 to make your payment. Your order will not be processed until payment is received.  
 **Mail Order:** Enclose a Check or Money Order made payable to DIT. Orders with incomplete information and/or insufficient payment will NOT be processed.  
 **In Person:** Pay your fee in the Student Accounts office. Your order will not be processed until payment is received.

**E. Delivery method instructions (select one)**

- Fax to this number:  
 \_\_\_\_\_  
 UPS to Current Mailing Address (as provided above)  
 UPS to Different Mailing Address (complete in space below)

**DELIVERY ADDRESS:**

**TOTAL DUE = \$ \_\_\_\_\_ .**

Authorization Signature Required: I authorize release of my records as directed on this DIT Order Form \_\_\_\_\_ Date \_\_\_\_\_  
**X**

# DIVERS INSTITUTE OF TECHNOLOGY TRANSCRIPT AND CERTIFICATION ORDER FORM



## FERPA CERTIFICATION AND RELEASE

The Family Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; CFR Part 99) is a federal law that protects the privacy of student education records.

FERPA gives parents rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students who meet these criteria are "eligible students."

Eligible students have the right to inspect and review their education records. The Divers Institute of Technology (DIT) is not required to provide copies of records unless, for reasons such as great distance, it is impossible for the student to review the record. DIT may charge a fee for copies. The Divers Institute of Technology is not required to release an official copy of the student's transcript if there are outstanding balances on the student's account or if other holds have been placed on the release of the official transcript.

Eligible students have the right to request that DIT correct records which they believe to be inaccurate or misleading. If the DIT decides not to amend the record, the student has the right to place a statement in their file detailing their view about the contested information.

An eligible student has the right to release information from their education record however there must be written statement in the student's file releasing this information.

## STUDENT RELEASE OF INFORMATION

I understand that any and all personally identifiable information concerning my financial aid is protected under FERPA. I further understand that I may waive that protection and give access of my records to individuals of my choice.

I agree to waive my rights under FERPA and allow the below-named individual(s) to receive access to my education records.

Full Name (First, MI, Last)

Relationship to student

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I acknowledge that this release is valid until I have completed this program at the Divers Institute of Technology. I understand that I can revoke this release at any time by notifying the Financial Aid Office or Business Office in writing.

Signature required

Date

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