



# CRAWFORD UNIVERSITY

FAITH CITY, IGBESA, OGUN STATE

## ACADEMIC RECORD REQUEST FORM

### SECTION A

(To be completed by the applicant)

1. NAME \_\_\_\_\_ GENDER \_\_\_\_\_

2. (a) MATRIC NO. \_\_\_\_\_ (b) YEAR OF ENTRY \_\_\_\_\_

(c) MODE OF ENTRY \_\_\_\_\_ (d) PURPOSE OF THE REQUEST \_\_\_\_\_

3. COURSE OF STUDY \_\_\_\_\_

4 (a) CLASS OF DEGREE AWARDED \_\_\_\_\_ (b) YEAR OF GRADUATION \_\_\_\_\_

5. FULL ADDRESS/EMAIL OF THE PERSON/BODY/INSTITUTION/ORGANIZATION REQUESTING FOR THE DOCUMENT  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. AMOUNT PAID ₦ \_\_\_\_\_

7. REQUEST TYPE (Please tick the appropriate boxes)

- INTERNAL TRANSCRIPT (WITHIN CRAWFORD UNIVERSITY)
- STUDENT TRANSCRIPT (UNOFFICIAL)
- LOCAL TRANSCRIPT (EMAIL COPY ONLY)
- INTERNATIONAL TRANSCRIPT (EMAIL COPY ONLY)
- LOCAL POST TRANSCRIPT (HARD COPY ONLY)
- INTERNATIONAL POST TRANSCRIPT (HARD COPY ONLY)
- LOCAL TRANSCRIPT (HARD & EMAIL COPY ONLY)
- INTERNATIONAL TRANSCRIPT (HARD & EMAIL COPY ONLY)
- WORLD EDUCATION SERVICES (WES) TRANSCRIPT (EMAIL COPY ONLY)
- ENGLISH PROFICIENCY (HARD & EMAIL COPY ONLY)
- VERIFICATION OF RESULTS OR CERTIFICATES (HARD & EMAIL COPY ONLY)
- REMARKING OF EXAMINATION ANSWER SCRIPTS

8. ADDITIONAL INFORMATION (e.g DDR Code/WES Ref #) \_\_\_\_\_

9. APPLICANT SIGNATURE/DATE \_\_\_\_\_ / \_\_\_\_\_ TEL. NO. \_\_\_\_\_

Note: Please scan the filled form and the evidence of payment to [examsandrecords@crawforduniversity.edu.ng](mailto:examsandrecords@crawforduniversity.edu.ng)