



**ACADEMIC DOCUMENT RETRIEVAL REQUEST FORM**

INDIANA UNIVERSITY-PURDUE UNIVERSITY INDIANAPOLIS  
OFFICE OF INTERNATIONAL AFFAIRS  
902 W. NEW YORK STREET, ROOM 2126  
INDIANAPOLIS, INDIANA 46202-5197

CONTACT INFORMATION

TEL: 317-274-7000

FAX: 317-278-2213

[OIA@IUPUI.EDU](mailto:OIA@IUPUI.EDU)

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All items submitted in support of applications for admission become the property of IUPUI. These documents are converted to electronic file format and retained in paper form for one year from the date the document is received and scanned. After that date, all documents are destroyed.

If you are a graduate applicant/student, before filling out the form below, please check with your department to see if the official document was retained by the department rather than the Office of International Affairs. Departments that routinely retain the official academic documents are: Law, Dentistry, MBA, Purdue programs.

If you wish to retrieve any **academic** documents, please follow the steps below. (Financial documents are not returned.) There is a \$15.00 non-refundable service fee required for each request (a single request can include multiple documents).

Follow the steps below to indicate what documents you want retrieved, how you want the documents returned to you and payment instructions for the service fee and express mailing if so requested. Please understand that it will take up to four to six weeks for these documents to become available.

**STEP ONE: REQUEST FOR RETRIEVAL**

Name (as it appears on passport) \_\_\_\_\_

Variations of your name \_\_\_\_\_

Email address: \_\_\_\_\_ University ID # \_\_\_\_\_

Select one:

Undergraduate Student at time of IUPUI application

Graduate Student at time of IUPUI application

I request the return of my original academic documents:

Transcript or marksheet **Institution Name** \_\_\_\_\_

**Institution Name** \_\_\_\_\_

Diploma **Institution Name** \_\_\_\_\_

**Institution Name** \_\_\_\_\_

**STEP TWO: METHOD FOR RETURNING DOCUMENTS** Select one:

I request an email message notifying me that my documents are ready for pick up at the *Office of International Affairs, 902 W. New York Street, Room 2126, Indianapolis, IN 46202. Fax 1.317.278.2213. (Office hours Monday through Friday 9:00 AM through 5:00 PM.)*

I request the documents to be sent to me via airmail / post and an email notification that the documents were sent.

Mailing Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

I request the documents to be sent to me via express mail to the address below and an email notification that the documents were sent. I understand that you will use my credit card information provided below to pay for the express mailing.

**Please note that most express mail will not deliver to a PO address. You need to provide a street address and a local telephone number.**

Mailing Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Local phone number: \_\_\_\_\_

**See page two for payment procedures.**

### STEP THREE: PAYMENT OF DOCUMENT RETRIEVAL SERVICE FEE

#### Document Retrieval Request Service Fee of \$15.00

Payment can be made by either check or money order or credit card. Check the box for your payment method (note that the payment will not be processed until the documents have been located and are ready to be returned):

If paying by check or money order, submit a **check or money order in the amount of US \$15** payable on a U.S. bank to: **IUPUI – International Affairs. Do not send cash.**

If paying by credit card, provide the following information:

VISA    MasterCard   Expiration Date \_\_\_\_\_ / \_\_\_\_\_

Number: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Card Billing Address, City, State, Zip Code: \_\_\_\_\_

#### Payment for Express Mailing

Indicate by checking this box that you are requesting your documents to be returned by express mail and that you are granting permission for the payment for this service to be charged to your credit card by the express carrier.

Signature of Requestor: \_\_\_\_\_

Date \_\_\_\_\_

University ID # \_\_\_\_\_

**Staff Use Only**   Request Rec'd \_\_\_\_\_   Initials \_\_\_\_\_   Batch # \_\_\_\_\_   Box Type: Admissions / Advising  
OIA Box No. \_\_\_\_\_   SKP Code No. \_\_\_\_\_   Date Sent to Iron Mountain \_\_\_\_\_  
Date file received from IM \_\_\_\_\_   Date sent to requestor: \_\_\_\_\_   Email sent to requestor \_\_\_\_\_  
Date payment processed \_\_\_\_\_   Notes: \_\_\_\_\_