

# Linguistic Society of America

## Linguistic Institute Transcript Request

### PAYMENT IS REQUIRED WITH ORDER.

#### PLEASE TYPE OR PRINT – ALL INFORMATION IS REQUIRED

Name as it appears on your student record \_\_\_\_\_

Institute attended \_\_\_\_\_

Dates attended \_\_\_\_\_ Degree(s) received \_\_\_\_\_

Type of transcript requested: Official (signed, sealed envelope) \_\_\_\_\_ Unofficial \_\_\_\_\_

Student's address \_\_\_\_\_

Address where transcripts are to be sent (if different from above) \_\_\_\_\_

Student's contact phone number (in case of questions about your order) \_\_\_\_\_

Type of transcript	Cost per transcript	Quantity	Total
E-mail (as .pdf attachment)	@ \$10.00		
Mail	@ \$8.00		
In person	@ \$8.00		
Shipping: No charge for USPS First Class mail. Contact LSA for express shipping rates.			
<b>TOTAL PAYMENT</b>			

**Please allow 1-2 business days for processing online transcripts, 3-5 business days for other types.**

#### Check or Money Order payments must be in U.S. Dollars

**TOTAL PAYMENT AMOUNT (Membership & Donation, if applicable):** \_\_\_\_\_

Check/Money Order    Credit Card    VISA    MasterCard

**CARD NUMBER:** \_\_\_\_\_ **EXP DATE** \_\_\_\_\_ **VIN** \_\_\_\_\_

**NAME AS IT APPEARS ON THE CARD:** \_\_\_\_\_

**PLEASE SEND COPY OF INVOICE WITH PAYMENT AND REMIT TO:**

**If a credit card payment, you may fax this form to: 202-835-1717**

**If paying with a check, please send form and check to:**

**Linguistic Society of America**  
1325 18th Street, NW, Suite 211, Washington, DC 20036  
202-835-1714; fax: 202-835-1717; email: [rlewis@lsadc.org](mailto:rlewis@lsadc.org)  
**FEIN#: 74-6043371**