Eastern students must order transcripts through Parchment.com.

NAES Transcript Request Form

Eastern Illinois University, Office of the Registrar 600 Lincoln Avenue, Charleston, IL 61920-3099 Ph: (217) 581-3511 Fax: (217) 581-3412

With the approval of the Illinois Board of Higher Education, Eastern Illinois University has accepted custody of the academic records of the Native American Education Services College (NAESC) and has agreed to provide copies of documents contained in those records upon request. Eastern Illinois University makes no judgement as to the validity, content, or rigor of any course or program represented on the documents.

NAME:				
Last	First	Mi	ddle	Previous Name
LAST 4-DIGITS of SS#:	DAT	E OF BIRTH:		
CURRENT ADDRESS:				
Street Addr	ess	City	State	Zip Code
PHONE NUMBER:	R:		MAIL:	
\$15 per copy - Number request	ed			
Where should transcript be sen transcripts are available	t? Provide Name/Ad	dress for Mailir	ng below – No	Electronically sent
Name:				
Address:				
City/State/Zip Code:				
Franscripts must be paid for at	the time of order by o	cash, check, or	money order.	
Student's Signature: (This must be	the student's actual			
Staff use only: Amount	Check/MO#	Cash		