

Keystone Technical Institute Transcript Request

Current Name: _____
 Last Name While Attending KTI: _____
 Current Address: _____
 Telephone: _____ Email Address: _____
 Date of Birth: _____ Social Security Number: _____
 Dates Enrolled (MM/YYYY): _____ Enrolled Program: _____

I am requesting _____ copies of my
 official transcripts unofficial transcripts

Mail Transcript and processing fee to:
 Keystone Technical Institute
 2301 Academy Drive
 Harrisburg, PA 17112

Please Note:

- Official Transcript fee is \$5.00 per transcript
- Accepted methods of payment: Cash, Check, Money Order, Visa, Master Card and Discover
- If you are applying for transcripts to send to another college or for employment purposes they may not be considered official if you open them.
- No transcripts will be released if there is an Academic or Financial hold on your account.
- Please allow 7-10 business days for transcripts to be mailed.
- Keystone Technical Institute is formerly known as Academy of Medical Arts and Business

ATTN: Registrar's Office

For more information or to pay by phone, please contact the Registrar's office at 717.545.4747, by email at rhoch@kti.edu or fax 717.901.9090.

Mail Transcript To:

Attn: _____
 Address: _____

Mail Transcript To:

Attn: _____
 Address: _____

Payment Method: Cash Check Money Order Credit

Credit Card Payment Information

Name On Credit Card: _____
 Credit Card Number: _____
 Expiry Date: _____ CVV: _____

Bursar Information Only:

- No Financial Hold
- Financial Hold on account/Do Not Release

Registrar use only:

Received: _____ Completed: _____ Sent: _____

