



### Transcript Payment Information Form

**DUE TO THE SENSITIVE AND CONFIDENTIAL NATURE OF THE INFORMATION REQUESTED BELOW  
DO NOT SUBMIT PAYMENT VIA EMAIL – SEE BELOW FOR PAYMENT OPTIONS**

**OVERNIGHT Payment Information:**

- Requests for overnight transcripts will be charged for expedited service (\$20 per overnight transcript) and must be **received no later than 10:00 am CT** on the business day you wish to have them sent. Any request and payment received after that time will be processed the next business day.
- Submission of the Credit Card Authorization section of this form following the options in the table below is only required if you are requesting **overnight** processing AND paying by credit card via mail or fax. Check payments and credit card payment received via phone for overnight processing requests do not require submission of this form.
- **No paid expedited services are required for transcripts going to UW Madison as our offices utilize inter-campus mail, the fastest and only route available for sending a transcript to UW Madison’s campus.** If you pay for overnight service to UW Madison your transcript will be sent via inter-campus mail and your payment will not be refunded.

**OVERNIGHT Payment Options & Submission:**

Payment Options	Guidelines	Submission Options
Credit Card	If paying by credit card, you may use MasterCard, Visa, American Express or Discover.	Mail: Complete and sign the Credit Card Authorization section* of this form and mail along with your signed Transcript Request Form to: UW Extended Campus – Attn: IL Transcript Request – 5602 Research Park Blvd., Suite 300 - Madison, WI 53719.
		Fax: Complete and sign the Credit Card Authorization section* of this form and fax along with your signed Transcript Request Form to our secured fax line: (608) 262-4096.
		Phone: Call our Student Services team at 1-877-895-3276 or (608) 262-2011 and provide credit card information over the phone. Be sure to submit your signed Transcript Request Form via mail, fax or email.
Check	Made payable to the <b>University of Wisconsin-Extended Campus</b>	Mail: Mail your check along with your signed Transcript Request Form to: UW Extended Campus – Attn: IL Transcript Request – 5602 Research Park Blvd., Suite 300 - Madison, WI 53719.

\*Please note that you only need to complete the Credit Card Authorization section of this form and submit to us following the options above if you’re paying by credit card via mail or fax. **Due to the sensitive contents, this form cannot be submitted via email.** Check payments and credit card payment received via phone do not require submission of this form.

**Credit Card Authorization (for mail or fax of OVERNIGHT processing fees):**

Name (Last, First, Middle Initial)		Today’s Date	
Number of Transcripts Requested	Total Fee Due	Method of Payment	
		Check (enclosed)      Credit Card (see below)	
Type of Credit Card			
MASTERCARD		VISA	AMERICAN EXPRESS      DISCOVER
Credit Card Number		Credit Card Expiration Date (mm/yr)	
Cardholder Name		Cardholder Signature ( <b>Electronic signatures are not accepted</b> )	