

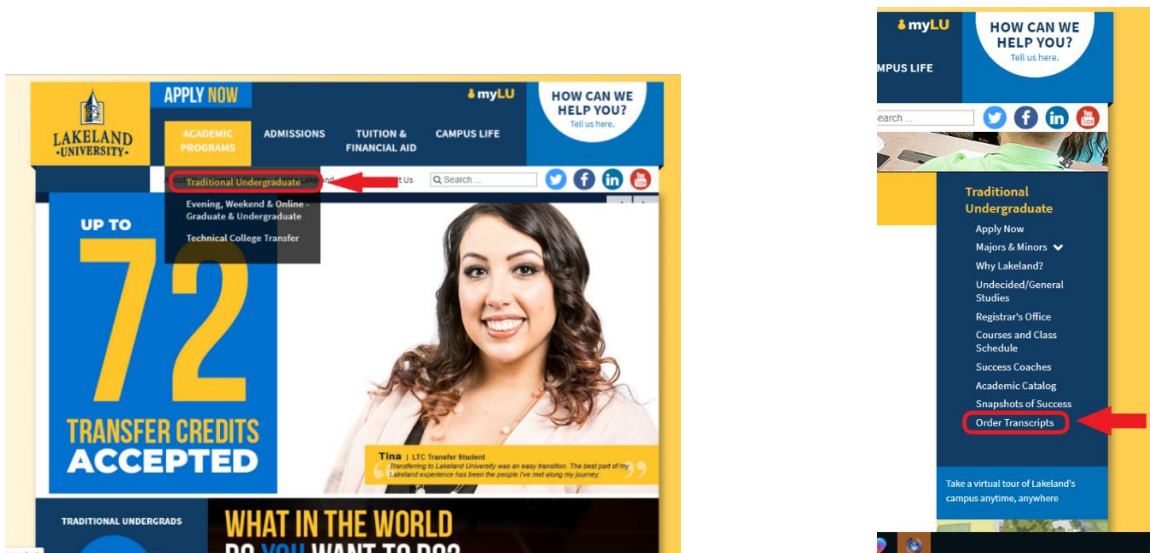
Official Transcript のオンライン・オーダーの方法

STEP1: まず、下記のものが必要となるので確認。

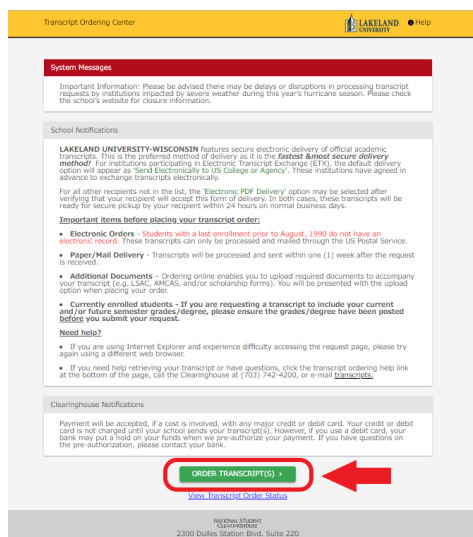
- 本人名義のクレジットカード
- **LUW の ID 番号** (※LUJ の 5 桁の番号ではありません)
- 自分の email アドレス
- 送付先の住所

または PDF で送信希望の場合はその送り先の情報(大学名、受取担当者のメールアドレス等)

STEP 2: LUW のサイト (<http://www.lakeland.edu>) を開き、“ACADEMIC PROGRAMS”にマウスのポインターを合わせると現れるメニューの中から、“Traditional Undergraduate”を選択し、次のページの右側のメニュー一覧から、“Order Transcripts”をクリックする。



STEP 3: “Lakeland University Welcome Center” の “Transcript Ordering Center”の Web ページが開く。開いたページの注意事項をよく読み、下の“order transcript(s)”ボタンをクリックする。



STEP 4: Student ID Number か Social Security Number (SSN) を入力する欄には下記のどちらかを選択し、入力すること。

1. LUW より発行されている LUW Student ID Number (4-6 桁)を入力する(学生証に記載あり)。
2. アメリカで発行された、Social Security Number を入力する(無ければ入力しない)。

Enter Personal Information

Personal Information All fields required, unless otherwise indicated

First Name _____ Middle Name _____ Last Name _____
(Optional)

Date of Birth _____ Has your name changed since attending school? YES NO
MM/DD/YYYY

Student Identification Information One of the following is required

Student ID _____ Confirm Student ID _____

OR

Social Security Number _____ Confirm Social Security Number _____
XXX-XX-XXXX XXX-XX-XXXX

Are you currently enrolled? YES NO

CANCEL ORDER CONTINUE

Student ID _____ Confirm Student ID _____

OR

Social Security Number _____ Confirm Social Security Number _____
XXX-XX-XXXX XXX-XX-XXXX

※ LUJ の Student ID Number は入力しない。不明ならば LUJ の Student Affairs に問い合わせること。

STEP 5: 自分の住所を入力。Lakeland University のデータベース更新に情報を使用することを許可する場合には“YES”を、そうでない場合は“NO”をクリックする。

Contact Information All fields required, unless otherwise indicated

Address 1 _____
Street number and name or PO Box

Address 2 _____
Building, campus box, floor, apt, suite (Optional)

City _____ State/Territory/APO _____

Zip/Postal Code _____ Country _____
United States

Email _____ Confirm Email _____

Phone Number _____
(XXX) XXX-XXXX

To receive NSC Msg updates to this phone number, you must Opt-in by selecting 'YES' below. You may receive up to 5 transcript text status updates for each recipient order. Message and data rates may apply. If text messaging is requested, you will receive an Opt-In confirmation message. For help text HELP. To cease messages, text STOP. Texting STOP will stop all text messages to the Opted-In mobile phone number for all existing transcript orders. Do you agree to Opt-in? [Terms of Use and Privacy Policy](#).

YES NO


Allow the school to use this information to update their records? YES NO

STEP 6: 成績証明書の送付先を選択する。

Select Transcript and Delivery Details

Recipient All fields required, unless otherwise indicated

According to the Family Educational Rights and Privacy Act (FERPA), in certain instances, schools must obtain the student's permission in order to release information from his or her educational records. The type of consent form that is required is determined by recipient type.

Who are you sending your transcript to? 

Who are you sending your transcript to? is required

STEP 7: 受取先の州と大学等を選択する。

*大学が受取先を学部別に指定している場合は、その学部名を明記すること。

Select Transcript and Delivery Details

Recipient All fields required, unless otherwise indicated


According to the Family Educational Rights and Privacy Act (FERPA), in certain instances, schools must obtain the student's permission in order to release information from his or her educational records. The type of consent form that is required is determined by recipient type.

Who are you sending your transcript to?
College or University

Country
United States

State/Territory/APO
Virginia

Enter the school you are sending your transcript to
Virginia Tech

Department Name
(Optional) 

STEP 8: 希望する Transcript の詳細と送付先について指定する。

Select Transcript and Delivery Details

Recipient: VIRGINIA TECH

Processing Details All fields required, unless otherwise indicated

Which transcript do you want sent?
Current transcript

Why are you ordering your transcript?

Delivery Information

Please indicate if you would like standard or rush processing. For your school's definition of the delivery text below.

How would you like this to be processed?

How do you want your transcript sent?

Enter other required instructions only (Optional)

Upload Attachment (optional)

Do you want to send additional documents with your transcript?

ADD FILE +

Current transcript

After Degree Is Awarded

After Grades Are Posted

After Degree is Awarded: 以下で指定する現在修学中の degree program が修了し、degree が授与された後に Transcript が発送される。

After Grades Are Posted: 以下で指定する現在修学中の学期が終了し、成績が入力された後に Transcript が発送される。

How would you like this to be processed?
How would you like this to be processed? is required

Use the current transcript sent?

Electronic

Express/International - \$55.00

Hold for Pickup

Mail

Electronic (PDF)、Express/International (速達国際郵便;追加料金 \$55) Mail (普通郵便)のいずれかを選択。**「Hold for Pickup」は LUW のオフィスに送付されるので、選択しないこと!**

Electronic (PDF): 必ず送付先が PDF を受け付けているか確認の上で選択し、Terms and Conditions をよく読んで、“YES”をクリックする。

How do you want your transcript sent?
Electronic

How many copies do you want?
1 copy = \$8.00

Enter other required instructions only (Optional)

School's Terms and Conditions:
Shortly after your request is processed by your school, your transcript recipient will be emailed a link to a secure Internet page where he or she can retrieve your official transcript. Upon that email notification, your credit card will be charged. The National Student Clearinghouse will guarantee that your recipient is notified that your transcript is ready for retrieval at the email address you provided when you placed the order; however, we cannot be responsible for whether or not your recipient retrieves or accepts the transcript. Because this is a new technology, we suggest that you contact your recipient and verify that he or she is willing to accept your transcript via this delivery method. The accuracy and correctness of the electronic transcript is solely the responsibility of your school.

I have read and accept my school's terms and conditions for the delivery method of Electronic?
Acceptance to the Terms and Conditions is required.

YES



STEP 9: Email アドレスを正しく入力する。

Provide Delivery Information

Recipient: VIRGINIA TECH

Recipient Delivery Information All fields required, unless otherwise indicated

Recipient
VIRGINIA TECH



Recipient Email Address  Confirm Recipient Email Address 

STEP 10: 支払い画面に表示される料金を確認する。 修正があれば“Edit”ボタンを押して前の画面に戻る。間違いがなければ、“CHECKOUT”をクリック。


Checkout

Pending Order Details

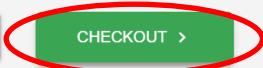
ADD RECIPIENT +

 Edit  Remove

Recipient: VIRGINIA TECH
Email: J@J.EDU

Total Fee for this Recipient:	\$8.00
Processing Option:	Current transcript
Delivery Method:	Electronic 
Quantity:	1 copy
Transcript Quantity Fee:	\$8.00


Total Fee for Order: \$8.00

CANCEL ORDER 

Step 11: 個人情報を書面にすることに同意するプロセスとして、E-signature が求められる。枠内の指示を読んで署名すること。

Electronic Consent Form

The fastest way to submit your consent form is electronically. Use your finger or mouse to draw your signature and download a signed copy of the consent form for your records prior to providing payment in the next step.

Need Help Signing? 

Sign Here

Sign Here

Signature Date: _____

By submitting this signature, I, J J J, certify that I am the above-named student and my electronic signature provided on this form is authentic and has the same validity and legally binding effect as signing this consent form by my hand in ink.

Desktop

Hold down the left button on your mouse and, using the mouse, sign your name in the signature box as you would with a pen.

Mac with Trackpad only: Hold down the options button on the keyboard, continue to hold down the options button while pressing your finger onto the trackpad, sign your name in the signature box while signing your name on your trackpad.

Mobile





Sign your name in the signature box using your finger as a stylus.

STEP 12: 最後に、クレジットカード情報を入力して、申し込み手続きが完了します。

Checkout

Payment Details All fields required, unless otherwise indicated

Accepted Credit Cards:



Cardholder Name _____ Card Number _____ Security Code _____

Expiration Date

Month _____ Year _____

Do you want to use your contact address as your billing address?

Address 1
Street number and name or PO Box _____

Address 2
Building, campus box, floor, apt, suite (Optional) _____

City _____ State/Territory/APO _____

Zip/Postal Code _____ Country
United States _____

Selecting "Submit Order" will transmit your payment information to [First Data Corp](#), a third party payment processing provider. First Data will only share your name, address, or e-mail address with National Student Clearinghouse.

Total Fees for Order: \$8.00