



NIGHTINGALE COLLEGE

175 South Main Street, Suite#400
Salt Lake City, Utah 84111
(801) 689-2160; (toll-free)-855-885-9568
Fax: (801)-689-3114

LEARNER REQUEST FOR OFFICIAL LEARNER FILE

Instructions to student: Student who is requesting a copy of his/her official student file must fill this form out and must be signed by all Departments listed below. Submit the completed form to the Registrar's Office for final file approval. Please be sure to complete the entire form. An incomplete form will not be accepted.

Student's Name: _____

Email Address: _____

Phone Number: _____

Expected Graduation Date: _____

Degree: _____

Student's Signature: _____

Today's Date: _____

Items requested:

Please initial for requested form(s):

Copy of all official transcripts	
Student enrollment agreement	
Student resume & application letter	
Current transcript	
Other	

DDC Area Manager Printed Name Date

Director of Financial Aid Printed Name Date

LALR Manager Printed Name Date

Registrar Printed Name Date

Additional Comments:
