

# TRANSCRIPT REQUEST FORM

National Board of Chiropractic Examiners, 901 54th Avenue, Greeley, CO 80634

Use this form to request a transcript *AFTER* you confirm that you have passed the NBCE exams required by your licensing agency. The NBCE processes transcript requests when received. **The NBCE does not hold requests received before scores are released on your MyNBCE account.** Transcripts include only your most recent passing scores. (See additional instructions below.)

Please send transcripts to the STATE (S) of: \_\_\_\_\_

If you requested Illinois, or if your transcript must include all scores, "I authorize the release of historical scores." \_\_\_\_\_ (Initial)

And/or send to other agency: \_\_\_\_\_

Print your legal name: \_\_\_\_\_

(If you have legally changed your name since your last correspondence with the NBCE, see the instructions below.)

Your mailing address: \_\_\_\_\_

(Include street, city, state and zip code.)

Your e-mail address: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Phone number: \_\_\_\_\_ NBCE examinee no.: \_\_\_\_\_

**Following completion of your NBCE exams, one complimentary transcript will be sent to the licensing board of your choice. (If you have been licensed by a state board, you have used your complimentary transcript.)** Additional transcript requests are processed at the rate of \$25.00 per state board, payable to NBCE. The NBCE will accept a personal check for this request if it is imprinted with your name and address. If you wish to pay by credit card, visit [mynbce.org](http://mynbce.org) and sign into your user account to order the transcript. See the instructions below for information on expedited transcript mailing services and calculate charges accordingly.

**Transcript Fee:** For all requests after complimentary transcript (mailed USPS) \$25 x \_\_\_\_\_ states \_\_\_\_\_

**Optional Fee:** Expedited Processing (processed same day received and sent Federal Express Overnight) \$45 x \_\_\_\_\_ states \_\_\_\_\_

**TOTAL:** \_\_\_\_\_

I authorize the National Board of Chiropractic Examiners to release a transcript to the licensing board(s) or entity(ies) indicated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Instructions for requesting NBCE transcripts:

- **Transcript Request:** Complete above form, enclose appropriate fees, and mail to address at top of the page. Upon request receipt, transcripts will be processed and mailed USPS within two business days, unless you requested expedited processing. (See Mailing Charges below.)
- **Name Changes:** If your name has changed, include a copy of supporting documentation to ensure that the transcript is correct.
- **Mailing Charges:** To have your transcript processed and mailed the same day it is received, please include \$45 in addition to the cost of the transcript. It will be mailed Federal Express Overnight.
- **Part I, Part II, PHT, Acupuncture and Special Purposes Examination for Chiropractic (SPEC):** Subject to varying state regulations, the NBCE releases transcripts containing the most recent scores.
- **Part III:** Can only be released upon successful completion (score 375 or above) of both Part I and Part II exams. A Part III transcript reports only the most recent score, unless a historical score record is required by the state licensing agency. Please refer questions to the state board.
- **Part IV:** Can only be released upon successful completion (score 375 or above) of the Part I, II and III exams. Please contact the NBCE for clarification if you were licensed prior to December 31, 1997.
- **State Requirements:** Each state board imposes unique requirements for licensure which are subject to change. Please contact the state board regarding current state licensing and score requirements.

**For NBCE use only**

Initials: \_\_\_\_\_

Amt Received: \_\_\_\_\_

Amt Refunded: \_\_\_\_\_

Date Sent: \_\_\_\_\_