

## REQUEST FOR TRANSCRIPT OF RECORDS – RELEASE AUTHORISATION FORM

**Note to applicant:** If you have higher education from the USA, China, the Philippines, Eritrea, Ethiopia, Nigeria, Ghana, Cameroon or the Sudan, you must make a request to your university/university college to send the transcript of your academic records **directly** to Oslo and Akershus University College of Applied Sciences (HiOA).

Please complete this form and send it to the registrar's or controller of examinations' office at your higher education institution.

It is important that you fill in the name of the faculty at HiOA that will process your application. Please see [www.hioa.no](http://www.hioa.no) > Study Programmes for an overview of the faculties and programmes.

Name of applicant: \_\_\_\_\_

Previous name(s) (if applicable): \_\_\_\_\_

Date of birth (DD/MM/YY): \_\_\_\_\_

Name of university/university college \_\_\_\_\_

Dates of attendance: From (month/year) – to (month/year) \_\_\_\_\_

Student number: \_\_\_\_\_

I hereby authorise the release of my transcript of records to Oslo and Akershus University College of Applied Sciences

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's signature

**Note to the institution:** The above-named person has applied for his/her academic credentials to be assessed for recognition at Oslo and Akershus University College of Applied Sciences and requests that a transcript of his/her academic records be released to us. We ask you to enclose this form together with an official academic record in a sealed envelope with a signature across the back flap. **Please return the sealed envelope and this form *directly* to the relevant faculty at Oslo and Akershus University College of Applied Sciences by mail to:**

Oslo and Akershus University College of Applied Sciences  
Faculty of ..... [Faculty name must be entered by applicant before submitting the form.]  
P.O. Box 4 St. Olavs plass  
N-0130 Oslo  
Norway