



**SCHOOL NAME HERE**

1234 International Ave, City, Country  
P.O. Box 5678 | Phone: +123-456-7890 | www.schoolwebsite.edu

**Official Academic Transcript**

International Student Record

**Student Information**

Name:

ID Number:

Date of Birth:

\_\_\_ / \_\_\_ / \_\_\_\_

Nationality:

Program:

Period of Study:

\_\_\_ / \_\_\_ / \_\_\_\_ to \_\_\_ / \_\_\_ / \_\_\_\_

**Academic Record**

No.	Course Code	Course Title	Credit	Grade	GPA Value	Semester
1						
2						
3						
4						
5						
Totals / GPA						

**Remarks**

Registrar / Academic Affairs

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

Date: \_\_\_ / \_\_\_ / \_\_\_\_

International Office / Coordinator

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

Date: \_\_\_ / \_\_\_ / \_\_\_\_