

Registrar, Hawaii Tokai International College 91-971 Farrington Highway, Kapolei HI 96707 Email: studentservices@tokai.edu Fax: (808) 983-4173

## **Certificate of Expected Graduation**

	First	Middle Name/Initial	
Last			
Student ID:		Date of Birth: / / / Month Day Year	
Email Address:	@tokai.edu		
Signature (Required)			_
Select from the options:			
☐ Send Transcript To:			
	Sc	chool/Company/Organization etc.	
		Street Address	
	Apt/Suite/Other	City	State
	ZIP Code Country		
☐ Send as PDF by Ema	il:	(email address required. \$10.00)	
☐ Student Pick-Up			
Process Fee and Time:  \$10.00 per REGULAR corrections in \$15.00 per RUSH copy -  *Note: If you turn it in on  Mailing Fees: (Note: Prices are subject  Regular air mail within the Uricity mail within the Uricity mail within the Uricity mail outside the Express mail outside the	ne U.S. there is <b>no charge</b> (delivery withe U.S. add <b>\$2 per transcript</b> (delive U.S. add <b>\$9</b> (delivery within 4-5 busine U.S. add <b>\$30</b> (delivery within 2-3 busine U.S. add <b>\$40</b> (delivery within 7 busine U.S add <b>\$78</b> (delivery within 3-5 busin	Qty: ng will be on Monday  justed on the current postage rate without notification.) ithin 14-21 business days) erry within 10-14 business days) ess days) ness days) ness days) ness days) ness days)	
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