



## Electronic Transcript Exchange Agreement for Collegiate Institutions

1. The National Student Clearinghouse, a not-for-profit corporation organized under the laws of Virginia (“Clearinghouse”) and the undersigned Collegiate Institution (“Institution”) agree to the terms and conditions set forth in this Electronic Transcript Exchange Agreement (“Agreement”).
2. The Clearinghouse provides an Electronic Transcript Exchange (“ETX”) system and service to facilitate the electronic exchange of transcript files between participating organizations. The system provides registration and verification of participants, protocols for securely sending and receiving files, logging of file transmissions, and electronic notification.
3. The Institution has appointed the Clearinghouse its agent for purposes of reporting student enrollment information to participants in the student loan programs and to other authorized requestors in accordance with the Core School Participation Agreement. The Institution hereby appoints the Clearinghouse as its agent for purposes of electronic transcript transmissions in accordance with this Agreement and may use the Clearinghouse’s ETX services to facilitate the sending and/or receiving of transcripts through electronic means with other Clearinghouse participants who have formally agreed to participate in the ETX program. The Institution agrees to send and/or receive transcripts in an electronic format that is acceptable to the Clearinghouse and other ETX participants.
4. The Clearinghouse agrees to electronically notify the sending Institution that the electronic transcript has been received by the Clearinghouse, and electronically notify the receiving Institution when the electronic transcript has been placed in their mailbox, indicating how they can retrieve the document. The Clearinghouse does not store or maintain copies of the transcript in its database.
5. In consideration of the ETX service provided, the Institution agrees to pay fees in accordance with the Clearinghouse’s published fee schedule, or as mutually agreed in writing by the parties. The Institution agrees to remit payment within 30 days of receipt of a bill from the Clearinghouse.
6. The Institution will institute and maintain reasonable controls to ensure that the transcript it provides to the Clearinghouse under this Agreement is accurate. The Institution agrees that the Clearinghouse will not be responsible for actions, errors or omissions of the Institution.

The Clearinghouse will institute and maintain reasonable controls to ensure the integrity and security of its data transmission systems so that it provides transcripts solely to authorized recipients in accordance with the terms of this Agreement and applicable law. The Clearinghouse agrees to indemnify and hold the Institution harmless from any direct loss, cost, damage or expense suffered by the Institution as a direct result of the Clearinghouse’s failure to comply with its obligations under this Agreement. The Clearinghouse will maintain insurance covering errors and omissions in its data processing operations in the amount of at least two million dollars (\$2,000,000).

The parties agree to comply with all applicable laws and regulations governing the activities and services provided under this Agreement, including FERPA and other laws concerning the privacy and confidentiality of information and records.

7. The Clearinghouse will not retain or release personally identifiable information provided by the Institution except as specifically authorized under this Agreement. The Institution retains full ownership rights to the information in the transcript it provides to the Clearinghouse.

8. The Institution agrees to provide all notices under this Agreement to:

National Student Clearinghouse  
2300 Dulles Station Boulevard, Suite 300  
Herndon, VA 20171  
Attn: Vickie Graham, Contract Administrator  
Electronically: [graham@studentclearinghouse.org](mailto:graham@studentclearinghouse.org)  
Fax: 703-742-4234

The Clearinghouse agrees to provide all notices under this Agreement to the signatory and address below unless otherwise instructed in writing by the Institution. The Clearinghouse considers the signatory to this Agreement as its primary contact for all operational and systems issues related to transcript orders unless otherwise instructed in writing by the Institution.

- 9. The parties agree that all rights and obligations under this Agreement shall be interpreted, governed and enforced under the laws of Virginia, without giving effect to its choice or conflicts of law provisions.
- 10. The effective date of this Agreement is the date by which it is signed by both parties. This Agreement remains in effect until terminated by either party by providing sixty (60) days written notice to the other party. The parties agree that any subsequent modifications to this Agreement will be made only in writing.
- 11. All representations, warranties, disclaimers of liabilities, indemnifications, and covenants between the parties will survive the termination of this Agreement for any reason and in any manner and will remain in full force and effect between the parties.

NATIONAL STUDENT CLEARINGHOUSE

	Institution
Signature	OPEID (leave blank if unknown)
Ricardo D. Torres	
Print Name	Signature <span style="float: right;">Date</span>
President	Print Name
Title	Title
Date	Street Address
www.studentclearinghouse.org	City/State/Zip
	Telephone
	Email

**Your Service Implementation Contact**

If we should contact someone else at your institution other than the contract signee to initiate your service, please provide his/her name and contact information below.

Name (please print or type)	Title
Telephone	Email



**National Student Clearinghouse®**  
2300 Dulles Station Boulevard, Suite 300  
Herndon, Virginia 20171

703-742-4200  
[www.studentclearinghouse.org](http://www.studentclearinghouse.org)

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## **Electronic Transcript Exchange Schedule of Fees**

Electronic Transcript Exchange is provided free of charge to collegiate institutions that participate in our free Transcript Ordering service. Otherwise, the annual fee is 10 cents times the institution's enrollment (with a minimum annual fee of \$300) to send transcripts via Electronic Transcript Exchange. There is no cost to receive transcripts.



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 Herndon, Virginia 20171

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## ETX Profile Setup Form

School Name *(please print or type)*

School Code

Person Completing Form
Name _____
Title _____
Phone _____
Email _____

Technical Contact
Name _____
Title _____
Phone _____
Email _____

**Secure FTP Mailbox Setup:** Indicate the departments that require separate secure FTP mailboxes for sending and/or receiving electronic transcripts. Please copy this form to request more than three mailboxes.

Department Name	Allow to SEND transcripts? <i>(check one)</i>	SEND file formats <i>(check all that apply)</i>	Allow to RECEIVE transcripts? <i>(check one)</i>	RECEIVE file formats <i>(check all that apply)</i>	List of email addresses that should receive file notification emails <i>(attach separate sheet, if necessary)</i>
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EDI <input type="checkbox"/> PDF <input type="checkbox"/> XML <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EDI <input type="checkbox"/> PDF <input type="checkbox"/> XML <input type="checkbox"/> Other: _____	_____ _____ _____
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EDI <input type="checkbox"/> PDF <input type="checkbox"/> XML <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EDI <input type="checkbox"/> PDF <input type="checkbox"/> XML <input type="checkbox"/> Other: _____	_____ _____ _____
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EDI <input type="checkbox"/> PDF <input type="checkbox"/> XML <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EDI <input type="checkbox"/> PDF <input type="checkbox"/> XML <input type="checkbox"/> Other: _____	_____ _____ _____

**Fax form with Electronic Transcript Agreement to 703-742-4234**