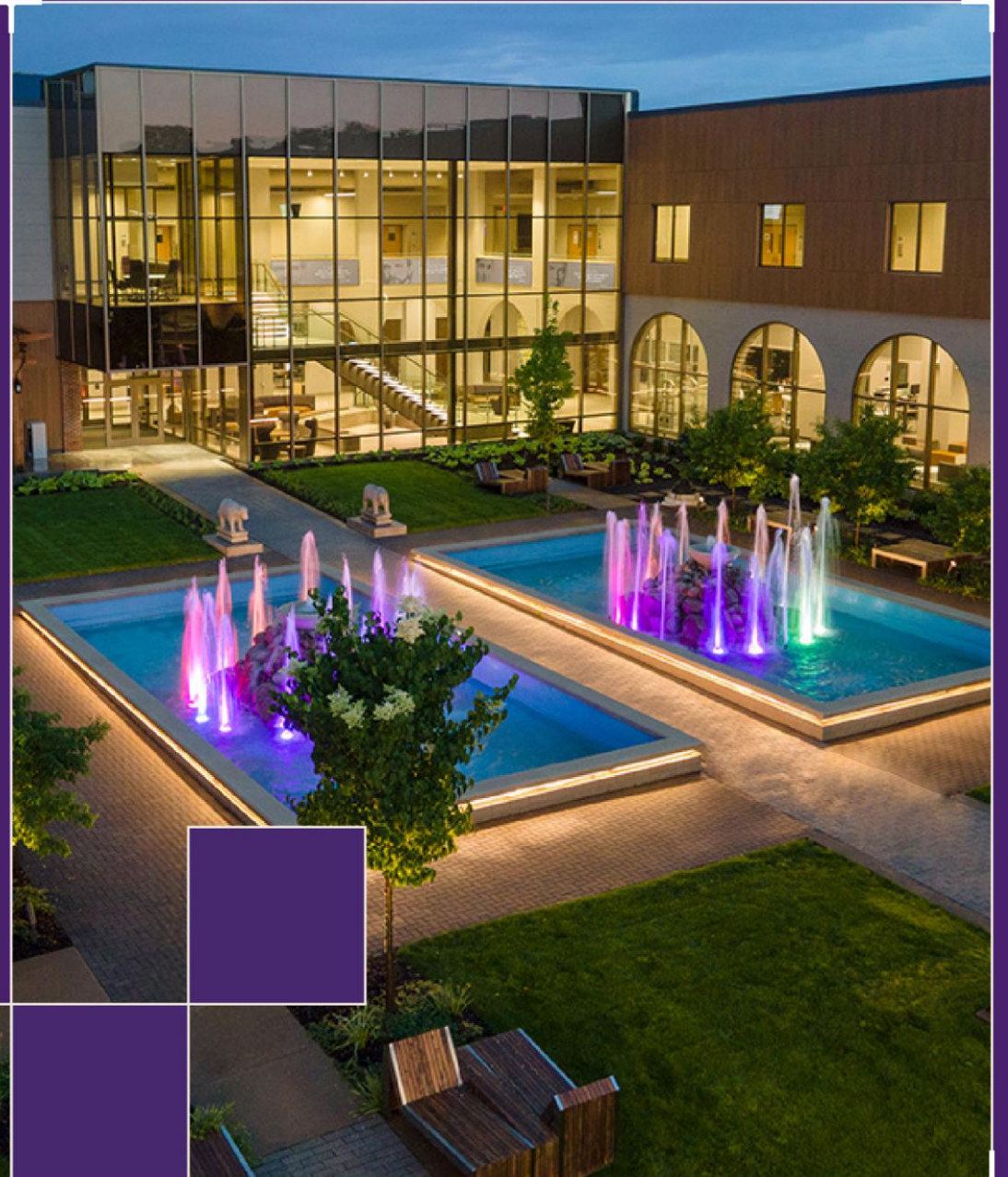


Parchment: How to Request Educational Documentation



PALMER
College of Chiropractic

The Trusted Leader in
Chiropractic Education®



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Turn every
diploma
into an
opportunity

Need to
make an
account?
Start here!

[Order Now](#)

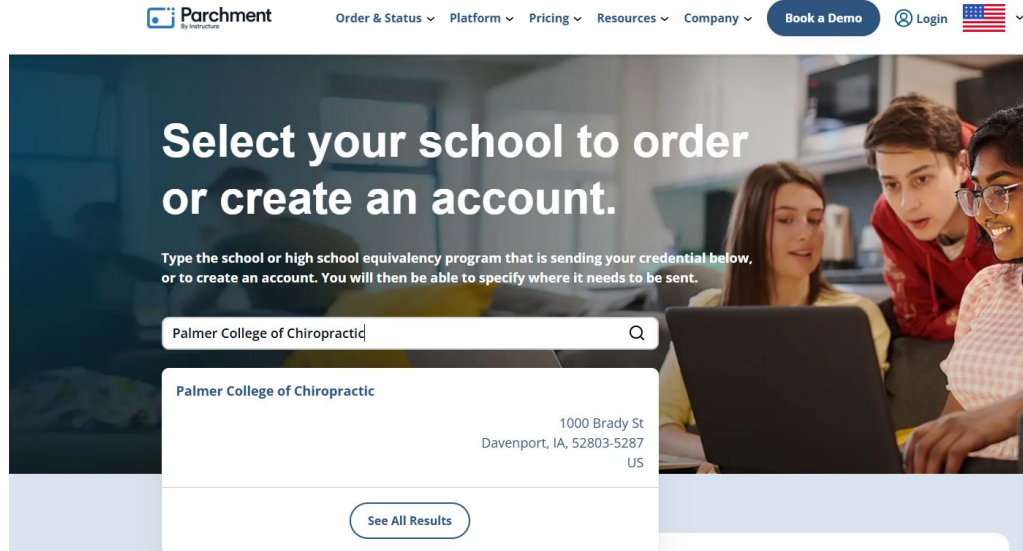
[Sign In to Check Status](#)

[Looking to verify graduation or enrollment?](#)

Already
have an
account?
Login here!



Step 1: Create an Account



1. Type “Palmer College of Chiropractic” in the search bar.
2. Click the school when it populates.
3. Type your information as prompted.
4. Validate email address if prompted.

This screenshot shows the account creation page for Palmer College of Chiropractic. The header includes the college's name and address: 'Palmer College Of Chiropractic', '1000 Brady St, Davenport, IA, 52803-5287, US'. Below the header, there are two options: 'Ordering your own credentials or academic records' and 'Ordering on behalf of someone else'. A message from the college states: 'A MESSAGE FROM PALMER COLLEGE OF CHIROPRACTIC: Welcome to Parchment. We're offering this service to make ordering transcripts easier for you. It's also more efficient for your school, and will deliver your transcripts to the colleges you choose in the format they prefer. If you have any questions about Parchment, select the "help" link above.' The 'START HERE - ENTER YOUR EMAIL ADDRESS' section contains an email input field and a 'Continue' button. A note at the bottom states: 'All items marked with a red asterisk are required.' At the very bottom, a small link reads: 'By signing up you agree to the Parchment terms of use and privacy policy.'


This screenshot shows the 'New Learner Account' page for Palmer College of Chiropractic. The header includes the college's name and address: 'Palmer College Of Chiropractic', '1000 Brady St, Davenport, IA, 52803-5287, US'. Below the header, there are two options: 'Ordering your own credentials or academic records' and 'Ordering on behalf of someone else'. The 'ENTER YOUR PERSONAL INFORMATION' section contains fields for 'First Name', 'Middle Name', 'Last Name', 'Month Of Birth', 'Day Of Birth', 'Year Of Birth', and 'Highest Level Of Education'. The 'ENTER YOUR CONTACT INFORMATION' section contains a 'Cell Phone' field.







Step 2: Palmer's Storefront

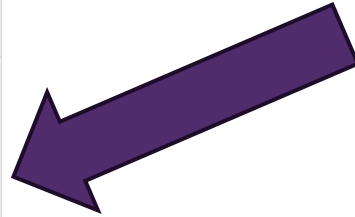
Available Credentials CANCEL x

STATE LICENSING BOARDS INFORMATION: Refer to the link below to confirm the information for your chosen State Board.
[State Licensing Boards Information](#)

 The following credentials are available from Palmer College of Chiropractic. Start your order by selecting a credential listed below (you can add more later)

	Transcripts An academic transcript is a inventory of courses that a learner has taken and the grades that they earned in those courses during the academic year.	Order
	Enrollment Verification An Enrollment Verification Certificate provides verification of a learner's student status. Some of the ways that it can be used by a learner is for employment, verification of student loans or insura ... View Full Description	Order
	Graduation Verification A Graduation Verification Certificate is used to confirm that a learner has successfully completed a program of study. For example, a Degree Certificate is often used to signify that a learner has co ... View Full Description	Order
	Replacement Diploma (Digital and Print) A Diploma is a certificate awarded by an educational institution to show that someone has successfully completed a course of study.	Order

Choose the document type that is needed.
New graduates: Please select "transcripts" if ordering for licensure.



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Step 3: Delivery Destination

[← BACK](#) Set Delivery Destination [CANCEL ×](#)

IMPORTANT NOTICE; PLEASE READ: Click on the "I'm sending to myself or another individual" link and provide all required information

STATE LICENSING BOARDS INFORMATION: Refer to the link below to confirm the information for your chosen State Board.
[State Licensing Boards Information](#)


Your order will be sent from Palmer College of Chiropractic to the individual and/or organization at the destination below.

Q Where would you like to send the credential? [Search](#)

OR

 [I'm sending to myself or another individual](#)

[I am sending this order to myself](#)

[I am sending this order to another individual](#) 

If you are sending to a recipient other than an educational institution (i.e. licensing board), please select "I'm sending to myself or another individual"

STATE LICENSING BOARDS INFORMATION: Refer to the link below to confirm the information for your chosen State Board.
[State Licensing Boards Information](#)

RECIPIENT INFORMATION

* School Name, Business, Person, or Your Name

* Recipient's Email

* Retype Email

[Continue](#)


[← Back to search](#)

Type in the information for your recipient.
If sending to licensing boards, please click the orange banner/see last slides for their information




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Step 4: Input Palmer Information

 FROM Palmer College of Chiropractic Davenport, IA

Delivery Method: Electronic

TO 

Credential Fee: \$20.00
Sales Tax: To Be Calculated
Item Total: \$20.00

STATE LICENSING BOARDS INFORMATION: Refer to the link below to confirm the information for your chosen State Board.
[State Licensing Boards Information](#)

* Program

* Purpose

* When do you want this sent?
 Send Now

Additional Comments

* Campus Attended

Add An Attachment File

Would you like to add an attachment file? (optional)

Please review the information below pertaining to the type of consent that is required to complete this order.

Sign here with mouse or finger

- Fill out your programmatic information
 - **If you earned both a BS and DC degree, please select “both”**
- Select your purpose
- “When do you want this sent?”
 - **Send Now:** Immediately
 - **Hold for Degree:** For graduating students
- Campus Attended
 - Davenport
 - Florida
 - California (closed – documents accessible)
- Additional Comments
 - ***If you are sending to Wisconsin’s boards, please type in your PAR# here***
- Sign & type your full name
- Click “Continue”



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Step 5: Checking Out

< BACK Order Summary CANCEL x

ⓘ Your order has not been placed yet. Please review and complete the order below.
Here's your order Expand All

FOR	ITEM	FROM	TO
	Transcripts	Palmer College of Chiropractic	

• Add another item for Test Subject

Total Credential Fees
Sales Tax To Be Calculated

Order Total

CONTINUE

Payment will be collected through Parchment's secure payment gateway upon order completion. Parchment adheres to the highest level of PCI compliance and never stores your credit card information. You will redirect to a secure payment screen.

- Look over your order summary to ensure everything is correct
- Click “continue”
- Input your billing address
- Click “continue”

SECURE PAYMENT GATEWAY

We adhere to the highest level of PCI compliance and never store your credit card information.

Payment Information

Enter first and last name as it appears on credit card

✓ Test	✓ Subject
--------	-----------

* Credit Card Number

* Exp Month * Exp Year * CVV

Billing Address ✓

VISA MasterCard DISCOVER American Express

1000 Brady St
Davenport, IA 52803
United States of America
Tel: 5638845863

Order Total	\$5.00
Sales Tax	\$0.35
Total amount that will be charged to this card	\$5.35

Submit Payment

- Input your billing information
- Click “Submit Payment”



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Order Complete: Next Steps

Once your order is complete, you should receive a confirmation email from Parchment.

Parchment will send updates to your order:

- Hold notifications – if applicable
- Processed by Palmer
- Received by recipient
- Opened by recipient

Please allow 1-3 business days for your Parchment order to be processed. Orders may be processed the same day but can take longer due to busy seasons (graduation).



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Important Notes for New Graduates

- **All document requests are processed through Parchment ONLY.**
 - Documents will be sent to states directly as required.
- **Transcripts = official transcripts, diploma copy, any additional documentation needed (see next slides).**
- **Additional documentation is needed prior to processing transcript requests**
 - Processing will be delayed if not sent immediately.
- Please be prepared to allow for an appropriate amount of time for the Registrar's office to process your request post-graduation.



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Requirements by U.S. State

Please note: The requirements listed below are not all licensing requirements for every state. These indicate the title of each state board; their email address and additional documentation needed from you as a student/alumni. Please see your state's website for the comprehensive list of state licensing requirements

State	Title	Email	Additional Documents
Alabama	Alabama State Board of Chiropractic Examiners	angela.johnson@chiro.alabama.gov	N/A
Alaska	Alaska Board of Chiropractic Examiners Division of Corporations, Business & Professional Licensing	boardofchiropracticexaminers@alaska.gov	Verification Form – Please fill out and send to registrar's office.
Arizona	Arizona Board of Chiropractic Examiners	Licensing@chiroboard.az.gov	N/A
Arkansas	Arkansas State Board of Chiropractic Examiners	ASBCE@Arkansas.gov	N/A
California	California Board of Chiropractic Examiners	Chiro.Info@dca.ca.gov	Chiro College Verification Form & Registrar Letter – We will take care of this.
Colorado	Colorado State Board of Chiropractic Examiners Division of Registrations	dora_dpo_licensing@state.co.us	N/A
Connecticut	State of Connecticut Department of Public Health Practitioner Licensing & Investigations State Board of Chiropractic Examiners	Dph.healingarts@ct.gov	N/A
Delaware	Division of Professional Regulation	DE_DPR_TRANSCRIPTS@delaware.gov	N/A
Florida	Florida Department of Health Florida Board of Chiropractic Medicine		BS Letter – We will take care of this.
Georgia	Georgia State Board of Chiropractic Examiners	plb-trades1@sos.ga.gov	Verification Letter – We will take care of this.
Hawaii	Hawaii Board of Chiropractic Examiners	chiropractor@dcca.hawaii.gov	Verification Form – We will take care of this.

Requirements by U.S. State

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State	Title	Email	Additional Documents
Idaho	Division of Occupational & Professional Licenses	chi@dopl.idaho.gov	N/A
Illinois	Illinois Department of Financial & Professional Regulations	FPR.medicalunit@illinois.gov	N/A
Indiana	Indiana Professional Licensing Agency Indiana Board of Chiropractic Examiners	PLPublic@idph.iowa.gov	N/A
Iowa	Iowa Board of Chiropractic Examiners Bureau of Professional Licensure	ksbha_licensing@ks.gov	Required Document – Please fill out and send to registrar.
Kansas	Kansas State Board of Healing Arts	kbce@ky.gov	N/A
Kentucky	Kentucky State Board of Chiropractic Examiners	Lsbce@eatel.net	N/A
Louisiana	Louisiana Board of Chiropractic Examiners	Chiropratic.lic@maine.gov	N/A
Maine	Maine Board of Chiropractic Licensure Department of Professional & Occupational Regulations	mdh.chiropractic@maryland.gov	N/A
Maryland	Maryland State Board of Chiropractic Massage Therapy Examiners	chiropractorsboard@mass.gov	N/A
Massachusetts	Board of Registration of Chiropractors Bureau of Health Professions Licensure	bpldata@michigan.gov	Verification Form – Please fill out and send to registrar.
Michigan	Michigan Bureau of Health Professions Michigan Board of Chiropractic	chiropractic.board@state.mn.us	N/A
Minnesota	Minnesota Board of Chiropractic Examiners	chiropractic.board@state.mn.us	N/A

Requirements by U.S. State

Please note: The requirements listed below are not all licensing requirements for every state. These indicate the title of each state board; their email address and additional documentation needed from you as a student/alumni. Please see your state's website for the comprehensive list of state licensing requirements

State	Title	Email	Additional Documents
Mississippi	Mississippi State Board of Chiropractic Examiners	support@msbce.ms.gov	N/A
Missouri	Missouri State Board of Chiropractic Examiners	chiropractic@pr.mo.gov	N/A
Montana	Montana State Board of Chiropractors	dlibsdhhelp@mt.gov	N/A
Nebraska	Board of Examiners in Chiropractic Nebraska Department of Health & Human Services	DHHS.RehabOffice@nebraska.gov	N/A
Nevada	Chiropractic Physicians Board of Nevada	chirobd@chirobd.nv.gov	N/A
New Hampshire	New Hampshire Board of Chiropractic Examiners	oplclicensing11@oplc.nh.gov	N/A
New Jersey	New Jersey State Board of Chiropractic Examiners	Chiropractic@dca.njoag.gov	N/A
New Mexico	State Of New Mexico Regulation & Licensing Department New Mexico State Board of Chiropractic Examiners	Chiropractic.Board@rld.nm.gov	N/A
New York	The NY State Education Department Office of Professions, Chiropractic Unit	dplseduc@nysed.gov	Verification Form – Please fill out and send to registrar's office.
North Carolina	North Carolina Board of Chiropractic Examiners	john@ncchiroboard.com	N/A
North Dakota	North Dakota State Board of Chiropractic	contact@ndsbce.org	N/A

Requirements by U.S. State

Please note: The requirements listed below are not all licensing requirements for every state. These indicate the title of each state board; their email address and additional documentation needed from you as a student/alumni. Please see your state's website for the comprehensive list of state licensing requirements

State	Title	Email	Additional Documents
Ohio	Ohio State Board of Chiropractic Examiners	contact@chr.ohio.gov	N/A
Oklahoma	Oklahoma State Board of Chiropractic Examiners	stacie.rasmussen@chiro.ok.gov	N/A
Oregon	Oregon Board of Chiropractic Examiners	info@obce.oregon.gov	Physiotherapy Letter – We will take care of this.
Pennsylvania	Commonwealth of Pennsylvania Department of State Bureau of Professional & Occupational Affairs State Board of Chiropractic	st-chiropractic@pa.gov	Verification Form – Please fill out and send to registrar's office.
Rhode Island	Board of examiners in Chiropractic Medicine Rhode Island Department of Health Office of Health Professionals Regulations	jelissa.batista@health.ri.gov	N/A
South Carolina	South Carolina Department of Labor, Licensing & Regulation Board of Chiropractic Examiners	contact.chiro@llr.sc.gov	N/A
South Dakota	South Dakota Board of Chiropractic Examiners	sdbce@iw.net	N/A
Tennessee	Tennessee Board of Chiropractic Examiners	unit2hrb.health@tn.gov	N/A
Texas	Texas Board of Chiropractic Examiners	licensing@tbce.texas.gov	N/A
Utah	State of Utah Department of Commerce, DOPL	b3@utah.gov	N/A
Vermont	Vermont Secretary of State, Office of Professional Regulation	sos.oprlicensing3@vermont.gov	Verification Form - Please fill out and send to registrar's office.

Requirements by U.S. State

Please note: The requirements listed below are not all licensing requirements for every state. These indicate the title of each state board; their email address and additional documentation needed from you as a student/alumni. Please see your state's website for the comprehensive list of state licensing requirements

State	Title	Email	Additional Documents
Virginia	Virginia Department of Health Professions, Board of Medicine Perimeter Center	dc-medbd@dhp.virginia.gov	N/A
Washington	Chiropractic Quality Assurance Commission Washington State Department of Health	CQAC@doh.wa.gov	Registrar Letter – we will take care of it.
Washington D.C.	Government of the District of Columbia Department of Health, Board of Chiropractic	dcboc@dc.gov	N/A
West Virginia	West Virginia Board of Chiropractic Education	wvchiroboard@outlook.com	N/A
Wisconsin	Wisconsin Chiropractic Examining Board	dspscredchiropractic@wisconsin.gov	PAR# - Include in comment/note section of Parchment order.
Wyoming	Wyoming State Board of Chiropractic Examiners	felisha.ojeda@wyo.gov	N/A
Virgin Islands	VI Board of Chiropractic Examiners c/o Department of Health	boardofchiropractic@doh.vi.gov	N/A

Canadian Requirements

*Please note: The requirements listed below are not all licensing requirements for every country. This lists contains some board information for Canada. This list includes: their title, email address and additional documentation needed from you as a student/alumni. **Please see your country's website for the comprehensive list of licensing requirements.***

Country	Title	Email	Additional Documents
Canada	Canadian Chiropractic Examining Board	exams@cceb.ca	Registrar Letter – We will take care of it.
Canada: Alberta	Registrar-College of Chiropractors of Alberta	registration@thecco.ca	Registrar Letter – We will take care of it.
Canada: Ontario	College of Chiropractors of Ontario	mcheng@cco.on.ca	Registrar Letter – We will take care of it.

Thank You!

Please call the Registrar's office with any questions: (563) 884-5863



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