

Academy of Our Lady High School

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Transcript Request

Transcripts are processed as rapidly as possible, usually within two (2) business days of the receipt of request. Please take into consideration school holidays and summers. The cost is \$ 3.00 per transcript.

Last *First* *Middle* *Maiden/Other Names*

Mailing Address *City* *State* *Zip Code*

Home phone (including area code) *Cell phone (including area code)*

Social Security Number *Date of Birth*

Email Address

Year of Graduation _____

Please circle school of graduation: AOL Blenk IHS

Signature for release of transcripts *Date*

Pursuant of Federal Law 93-380, this personal information is transferred only on the condition that you will not permit any other party to have access to such information without the written consent of the student. Having so transferred such information, Academy of Our Lady disclaims further responsibility.

MAIL TO THE ADDRESS BELOW: (Please Print)

For Office Use Only: Number Requested: _____ Fee Paid _____
Date Sent: _____