



OUR LADY OF NAZARETH ACADEMY  
WAKEFIELD, MASSACHUSETTS  
1947-2009

**Transcript Request Form**

Send to Sisters of Charity of Nazareth in Kentucky

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Full Name (maiden name if applicable)

\_\_\_\_\_  
Date of Graduation

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Current Address

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Daytime Phone Number

Transcript to be sent to (please include name and address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- \* Your account with Our Lady of Nazareth Academy must be current or your transcript will be withheld.
- \* Requests will be honored as quickly as possible in the order of receipt. Transcripts from other institutions cannot be duplicated. You must contact the institution directly.

**Cost:** The cost is **\$5.00** for each transcript sent. All of your work at Our Lady of Nazareth Academy is considered 1 transcript.

**Please make your check payable to Sisters of Charity of Nazareth.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please send this request and \$5.00 fee to:  
Sisters of Charity of Nazareth  
Office of Congregational Ministries  
P.O. Box 247  
Nazareth, KY 40048