



OUR LADY OF MERCY SCHOOL FOR YOUNG WOMEN
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ALUMNA TRANSCRIPT REQUEST

Official transcripts need to be mailed directly from Our Lady of Mercy School for Young Women. You may request an **unofficial** transcript be sent directly to you for your personal records.

Current Date _____ Year of Graduation _____

Name _____ Date of Birth _____
(Last, First, Maiden)

Request for: _____ College Admission Deadline
 _____ Scholarship
 _____ Employment Counselor Recommendation
 _____ Unofficial

Mail to:

Name _____
Address _____

Name _____
Address _____

YOU HAVE MY PERMISSION TO RELEASE MY TRANSCRIPT & TEST SCORES

(If required, you must indicate if you would like these sent):

Signed _____ Date _____

Address _____ Phone _____

For Office Use: Date mailed _____ Recorded by _____