

High School Transcript Request Form



Request for Assistance

To my Guidance Counselor:

Please mail a copy of my high school transcripts and ACT/SAT scores to:

Ohio Dominican University
Office of Admission
1216 Sunbury Road
Columbus, OH 43219
Phone: 800-955-6446
Fax: 614-251-0156

Student Name:

(First)

(Middle)

(Last)

Maiden Name (if applicable):

Phone Number:

High School:

Year of Graduation:

ID/SS Number:

Date of Birth:

Student Signature:

Date: