425 Salisbury Street • Worcester, MA 01609 • Tel: 508-757-6200, ext. 229 • Fax: 508-757-7200 • admissions@nda-worc.org

TRANSCRIPT AND STANDARDIZED TEST RELEASE FORM



Dear Parent(s) or Guardian(s):

with a stamped envelope addressed to Notre Dame Academy transcripts and test scores.	
Applicant Name	
Current School	
School Address	
School Telephone	
I give my permission for the release of my daughter's record should entail all school records for the past three years inclu- and any other information concerning my daughter. The requ	ding testing scores, grades, any standardized test results,
Academy by your current school. Transcript and test results strictly confidential. Thank you in advance for your assistance	• • •
Parent/Guardian Signature	Date Records Requested

Please complete the information below, sign the authorization, and give this form to your guidance counselor (along

Please submit transcripts and standardized tests to:

Notre Dame Academy Office of Admissions 425 Salisbury Street Worcester, MA 01609 or admissions@nda-worc.org