



Transcript Request Form

INSTRUCTIONS ▼

Please complete the information below and submit this request to your high school guidance counselor or school registrar. If you need more request forms, you may copy this form as many times as needed. Please do not send this form back to Word of Life Bible Institute without a transcript officially signed and sealed.

APPLICATION INFORMATION AND CONSENT ▼

Year applied: _____ Term: Fall Spring Name of applicant: _____
Name at time of attendance: _____ Campus: Florida New York Ontario, Canada
SS # or Date of Birth: _____ Applicant's address: _____
Phone number: _____ Email address: _____

By signing, I authorize the release of my academic records and related information to Word of Life Bible Institute.
Applicant's Signature: _____

INFORMATION FOR GUIDANCE COUNSELOR / REGISTRAR ▼

School Name: _____ Phone: (_____) _____
School Address: _____
Entrance Date: _____ Real or Expected Graduation Date: _____
Standard Diploma: Yes No If no, please explain diploma type: _____
Are SAT or ACT scores included with the transcript: _____
Word of Life Bible Institute considers a transcript official with the following:
Signature of school official | Raised seal of the school
Word of Life Bible Institute considers official transcripts final with the following:
Semester/Quarter grades by course (for 9th through 12th grades) | Final grades by course | Grading scale | Grade point average (unweighted on a 4.0 scale) | Graduation date

MAILING INFORMATION ▼

1. Enclose an official transcript.
2. Enclose school profile if available.
3. Mail transcripts and appropriate documents together to:

NEW YORK APPLICANTS

Word of Life Bible Institute
Admissions Department
4200 Glendale Rd.
Pottersville, NY 12860 | Fax 518.494.1534

FLORIDA APPLICANTS

Word of Life Bible Institute
Admissions Department
13247 Word of Life Dr.
Hudson, FL 34669 | Fax 727.856.9349

ONTARIO APPLICANTS

Word of Life Bible Institute
Admissions Department
RR #8
Owen Sound ON N4K5W4 CANADA | Fax 519.376.9893

4. A fax copy is acceptable for admission review, but we ask that the original be mailed after the documents have been faxed.

New York Applicants • 4200 Glendale Rd • Pottersville, NY 12860 • WORDOFLIFE.EDU • Fax: 518.494.1524 or admissions@wol.org
Florida Applicants • 13247 Word of Life Drive • Hudson, FL 34669 • WORDOFLIFE.EDU • Fax: 727.856.9349 or fladmissions@wol.org
Ontario Applicants • RR #8 • Owen Sound, ON N4K5W4 Canada • WOLBI.CA • Fax: 519.376.9893 or admissions@wolbi.ca