



Karen B. Salmon, Ph.D.
State Superintendent of Schools

Closed Nonpublic School Transcript Request

Please complete all items below to assist in completing your request. This fillable form can be mailed, faxed or emailed. Incomplete requests will not be processed.

Fax: (410) 333-8963 **Email:** holly.powell1@maryland.gov

Mail:

Maryland State Department of Education
Attention: Holly Powell
Nonpublic School Approval Branch
200 West Baltimore Street, 6th Floor
Baltimore, MD 21201

Number of copies requested: _____

Student Information

Last name: _____ First name: _____

Name when attending closed nonpublic school:

Birth date: _____ Email address:

Street address: _____

Phone number (include area code): _____ Graduation date: _____

School Information

Name of nonpublic school attended : _____

Location of school (city): _____

Signature _____ Date _____

Complete this portion if your transcript is to be sent to someone other than yourself.

Name of Agency, school, college or employer:

Recipient Name: _____

Address: _____

I hereby authorize the office of Nonpublic School Approval Branch to release my transcript to the recipient above.

Signature _____ Date _____