

Request For College Transcript

To the Applicant: Please photocopy this form and complete it (including signature) and send it to each college, university, seminary or learning institution you have attended since high school.

TO:

Registrar

Name of Institution _____

Address of Institution _____

I hereby authorize the release of the required academic information to Living Word Ministry University. Please forward a copy of my official transcripts to Dr. Alan E. Young, C/O Living Word Ministry University. The University asks you, the Registrar, to please sign across the sealed envelope flap.

Applicant's Signature _____

Applicant's Name (*printed*) _____

Years of Attendance _____

Degree(s) earned _____



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