

**OKLAHOMA BOARD OF NURSING**  
**2915 North Classen Blvd., Suite 524**  
**Oklahoma City, Oklahoma 73106**  
**405-962-1800**  
[www.ok.gov/nursing](http://www.ok.gov/nursing)

**CLOSED SCHOOL TRANSCRIPT AUTHORIZATION**

The Oklahoma Board of Nursing provides official and unofficial transcripts from closed Oklahoma nursing programs. To request a transcript, please complete the information below and submit to the Board office with the fee of **\$15.00 per transcript** payable to the Oklahoma Board of Nursing by cashier's or personal check or money order.

**OFFICIAL TRANSCRIPT(S):**

I authorize the Oklahoma Board of Nursing to submit official transcript(s) to:  
*(Print name and address of institution or agency)*

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**UNOFFICIAL TRANSCRIPT(S):**

I authorize the Oklahoma Board of Nursing to mail an unofficial transcript(s) to:  
*(Mail to the address below)*

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Your phone number \_\_\_\_\_

**IDENTIFYING INFORMATION:**

I attended \_\_\_\_\_  
**Name of Closed Oklahoma Nursing Education Program**

Location of closed school in Oklahoma \_\_\_\_\_

Under the name of \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Date of Graduation \_\_\_\_\_ If not graduated, date of withdrawal \_\_\_\_\_

Oklahoma License Number *(If Oklahoma license was ever obtained)*: \_\_\_\_\_