



PRINCIPAL/GUIDANCE COUNSELOR OFFICIAL FORM

THIS FORM MUST BE COMPLETED BY YOUR HIGH SCHOOL PRINCIPAL, HIGH SCHOOL GUIDANCE COUNSELOR OR HIGH SCHOOL REGISTRAR.

NAME OF APPLICANT: _____
LAST FIRST MIDDLE

ADDRESS OF APPLICANT: _____

APPLICANT'S PHONE: _____

YOUR NAME: _____

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

SCHOOL TELEPHONE: _____

APPLICANT'S GRADE IN SCHOOL: ____ 10th Grade ____ 11th Grade ____ 12th Grade ____ Graduate

GRADE POINT AVERAGE: _____
4.0 SCALE (MUST BE PROVIDED) WEIGHTED SCALE (REFERENCE ONLY)

CLASS RANK: _____ of _____
RANK CLASS SIZE

1. Please attach the transcript of the final junior grades and beginning senior year grades.
2. Please attach final senior grades, if submitting information for a graduate.
3. Please include a copy of the applicant's Senior Year schedule.
4. **Please provide transcript(s) in a sealed envelope with the school official's signature across the seal.**

SIGNATURE: _____

TITLE: _____

DATE: _____