School CEEB/ACT Code

SCHOOL REPORT

TO THE APPLICANT After completing all the relevant questions below, give this form to your secondary school counselor or another school official who knows you better. If applying via mail, please also give that school official stamped envelopes addressed to each institution that requires a School Report. Last/Family/Sur (Enter name exactly as it appears on official documents.) First/Given Jr., etc. Birth Date CAID (Common App ID) mm/dd/yyyy Address City/Town State/Province ZIP/Postal Code Number & Street Apartment # School you now attend CEEB/ACT Code Current year courses—please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line. Full Year/First Semester/First Trimester **Second Semester/Second Trimester Third Trimester** or additional first/second term courses if more space is needed IMPORTANT PRIVACY NOTICE: By signing this form, I authorize every school that I have attended to release all requested records and recommendations to colleges to which I am applying for admission. I also authorize employees at these colleges to confidentially contact my current and former schools should they have questions about the information submitted on my behalf. I waive my right to review all recommendations and supporting documents submitted by me or on my behalf. O I DO NOT waive my right to review all recommendations and supporting documents submitted by me or on my behalf. • I have chosen not to waive my right to review my recommendations and supporting documents. I understand that my decision may lead my counselors or teachers to decline to write recommendations on my behalf. I also understand that my decision may lead colleges to disregard any recommendations submitted on my behalf. I understand that my waiver or no waiver selection above pertains to all colleges to which I apply and that my selections cannot be changed after any recommendation or application submission. Required Signature TO THE SECONDARY SCHOOL COUNSELOR Attach applicant's official transcript, including courses in progress, a school profile, and transcript legend. (Check transcript copies for readability.) Use both pages to complete your evaluation for this student. Be sure to sign below before mailing directly to the college/university admission office. Do not mail this form to The Common Application offices. Counselor's Name (Mr./Mrs./Ms./Dr.) Signature 🐿 mm/dd/yyyy Title School School Address Number & Street City/Town State/Province ZIP/Postal Code School Website Address Counselor's Telephone (_ Counselor's Fax (_ Area/Country/City Code Area/Country/City Code Number

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Counselor's E-mail

Background Information

Class Rank	Class Size	Covering a pe	riod from	/yyyy) to	·/ <i>yyyy)</i>			loes your school Hono	
The rank is O weighted O unweighted. How many additional students share this rank?						If school policy limits the number a student may take in			
How do you report class rank? quartile quintile decile					a given year, please list the maximum allowed: AP IB Honors				
Cumulative GPA: on a scale, covering a period from to					Is the applicant an IB Diploma candidate? \bigcirc Yes \bigcirc No				
						Are classes taken on a block schedule? \bigcirc Yes \bigcirc No			
This GPA is O weighted O unweighted. The school's passing mark is						In comparison with other college preparatory students			
Highest GPA in cla	ass	Graduation Date				at your school, the applicant's course selection is:			
(mm/yyyy)						O less than demanding			
Percentage of gra	duating class immediately attending:	four-year two-year institutions				average demandingvery demanding			
Does your school require students to perform volunteer service? \bigcirc Yes \bigcirc No							nost demanding		
Is the applicant ar	n Advanced Cambridge (AICE) Diploma	Candidate? ○ Yes ○ No				O prefer not to respond			
Ratings Compared to other students in his or her class		ss year, how do y	ou rate this stud	dent in terms of:	V				One of the top
No basis		Below average	Average	Good (above average)	Very go (well abo averag	ove	Excellent (top 10%)	Outstanding (top 5%)	encountered (top 1%)
No basis	Academic achievement		Average	•	(well abo	ove		•	encountered
No basis	Academic achievement Extracurricular accomplishments		Average	•	(well abo	ove		•	encountered
No basis			Average	•	(well abo	ove		•	encountered
No basis	Extracurricular accomplishments		Average	•	(well abo	ove		•	encountered
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Has the applicate to academic memoval, dismi To your knowle Yes No [Note that you annulled, pardot incident and explaying discipling discipling to academic memory incident and explaying discipling discipling to academic memory incident and explaying discipling discipling the academic memory incident and explaying discipling discipling the academic memory incident and explaying discipling the academic memory incident and explaying the academic	Extracurricular accomplishments Personal qualities and character OVERALL ant ever been found responsible for a isconduct or behavioral misconduct, the sal, or expulsion from your institution added, has the applicant ever been adjuction of the same of the	disciplinary violathat resulted in an Yes No edicated guilty or sponding. It is question, or por otherwise order attach a separations to which to	ation at your sch disciplinary act School policy r convicted of a r rovide an explar ered to be kept of rate sheet of pap	average) ool from the 9th gion? These action prevents me from the crimisdemeanor or lation, if the crimisdential by a ler or use your was should there be	grade (or the second in responding felony? similar adjudicourt.]	e inteclude, gestommen	ernational equivalent are not limit or conviction hadation to give t	alent) forward, wited to: probation has been expung	whether related n, suspension, ed, sealed, date of each

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