

To be completed by High School

Academic Status Report

To the Applicant:

Please give this “Academic Status Report” to your high school counselor for completion. **The counselor will send this form along with a copy of your grade transcripts to the Foundation office by January 22.**

Applicant’s Name: _____

Address: _____

City, State & Zip: _____

Applicant ranks _____ in a class of _____ ACT Composite _____

*Grade Point Average (GPA) _____ (*Compute on 4.0 GPA Scale)

SAT - CR _____ Math _____ W _____ Total _____

- Academic Honors (Most Prestigious)
- Core 40 (College Prep)
- 21st Century Scholars Program (tuition provided)
- Graduation Qualifying Exam

Certification: All of the information on this form is true and complete to the best of my knowledge. I further confirm that the student is scheduled and has met all of the requirements which will be necessary to graduate with their class at the scheduled time. (If not, please note on the lines below what courses and or situations are pending for this student.)

Authorized Signature Title

High School

Additional Comments:

