

SCHOOL CERTIFICATION

This section must be completed by the school administrator or counselor.

Please provide the following data.

High School Information:

Name: _____

Address: _____

Phone Number: _____

Senior Status: Is the student a high school senior? Yes No

Anticipated Graduation Date: _____

Total Grade Point Average: _____

College Prep Information:

SAT Test Date: _____

SAT Scores: English _____ Math _____ Writing _____

ACT Test Date: _____ Composite Score: _____

College Enrollment Information:

List college (s) or trade school which the student has been accepted to:

School Administrator or Counselor Signature

Print Name: _____ Title: _____

Signature: _____