

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.

Legal Name _____
Last/Family/Sur (Enter name **exactly** as it appears on official documents.) First/Given Middle (complete) Jr., etc.

Birth Date _____ CAID (Common App ID) _____
mm/dd/yyyy


Address _____
Number & Street Apartment # City/Town State/Province Country ZIP/Postal Code

School you now attend _____ CEEB/ACT Code _____

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.
- ☐ 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  _____ Date _____

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.) _____
Please print or type

Signature  _____ Date _____
mm/dd/yyyy

Title _____ School _____

School Address _____
Number & Street City/Town State/Province Country ZIP/Postal Code

School CEEB/ACT Code _____ Counselor's E-mail _____

Counselor's Telephone (_____) _____ Counselor's Fax (_____) _____
Area/Country/City Code Number Ext. Area/Country/City Code Number

School Website Address _____

Background Information

Class Rank _____ Class Size _____ Covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

The rank is ☐ weighted ☐ unweighted. How many additional students share this rank? _____

☐ We do not rank. Instead, please indicate quartile _____ quintile _____ decile _____

Cumulative GPA: _____ on a _____ scale, covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

This GPA is ☐ weighted ☐ unweighted. The school's passing mark is _____.

Highest GPA in class _____ Graduation Date _____
(mm/yyyy)

Is the applicant an IB Diploma candidate? ☐ Yes ☐ No

Is the applicant an Advanced Cambridge (AICE) Diploma Candidate? ☐ Yes ☐ No

Is the applicant an AP Capstone candidate? ☐ Yes ☐ No

Percentage of graduating class immediately attending: _____ four-year
_____ two-year institutions

Does your school require students to perform volunteer service? ☐ Yes ☐ No

How many courses does your school offer:
AP _____ IB _____ Honors _____

If school policy limits the number a student may take in a given year, please list the maximum allowed:
AP _____ IB _____ Honors _____

Are classes taken on a block schedule? ☐ Yes ☐ No

In comparison with other college preparatory students at your school, the applicant's course selection is:

☐ less than demanding
☐ average demanding
☐ very demanding
☐ most demanding
☐ prefer not to respond

Ratings Compared to other students in his or her class year, how do you rate this student in terms of:

No basis		Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few I've encountered (top 1%)
	Academic achievement							
	Extracurricular accomplishments							
	Personal qualities and character							
	OVERALL							

① Has the applicant ever been found responsible for a disciplinary violation at your school from the 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from your institution. ☐ Yes ☐ No ☐ School policy prevents me from responding

If you answered "yes," please attach a separate sheet of paper or use your written recommendation to give the approximate date of each incident and explain the circumstances.

Note: Applicants are expected to immediately notify the institutions to which they are applying should there be any changes to the information requested in this application, including disciplinary history.

☐ Check here if you would prefer to discuss this applicant over the phone with each admission office.

I recommend this student: ☐ No basis ☐ With reservation ☐ Fairly strongly ☐ Strongly ☐ Enthusiastically