

# Secondary school report

Name of applicant \_\_\_\_\_

*last, first, middle, prefix*

Applicant's address \_\_\_\_\_

*street, city, state, zip*

School \_\_\_\_\_

*official name, address*

School guidance department telephone number \_\_\_\_\_

CEEB secondary school number \_\_\_\_\_

School Grading Key: (numerical equivalent, i.e. C = 70-75)

A = \_\_\_\_\_ B = \_\_\_\_\_ C = \_\_\_\_\_ D = \_\_\_\_\_

Rate the strength of curriculum this student has completed

\_\_\_\_\_ Minimal college prep      \_\_\_\_\_ Demanding      \_\_\_\_\_ Very Demanding      \_\_\_\_\_ Most Demanding

## TO THE COUNSELOR OR COLLEGE ADVISOR

Please attach this form to the front of your school's official transcript. We ask that you provide the following information so that we can know more about your school and this applicant. This form is confidential and will be destroyed before the student matriculates at Virginia Military Institute. Students for whom this form is not completed may stand at a competitive disadvantage in the selection process.

Objective information about the applicant:

1. This applicant ranks \_\_\_\_\_ from the top in a class numbering \_\_\_\_\_. This applicant has a cumulative grade point average of \_\_\_\_\_ on a 4.0 scale. This data covers the period from \_\_\_\_\_ through \_\_\_\_\_.
2. In what context(s) have you known the applicant? \_\_\_\_\_
3. Will this student receive the Virginia Advanced Studies Diploma?    \_\_\_ Yes    \_\_\_ No
4. Is the student enrolled in the International Baccalaureate (IB) program, Advanced Placement (AP) or Advanced Placement (AP) Capstone Experience?    \_\_\_ Yes    \_\_\_ No    If Yes, which program? \_\_\_\_\_
5. Has the applicant ever been placed on probation, served any suspension or dismissed from your institution?    \_\_\_ Yes    \_\_\_ No
6. Do you have any reason to doubt this student's honesty or to think he/she would find it difficult to work under an honor system?  
\_\_\_ Yes    \_\_\_ No    If yes, please explain fully.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of person completing this form \_\_\_\_\_ Print name: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Title: \_\_\_\_\_ Phone number: \_\_\_\_\_

**Important note:** The high school counselor should send this student's mid-year report to the Office of Admissions by February 1 or soon thereafter. This report may be sent on the school's standard grade report form.