

**NAME** SNYDER, MOLLY

- Application Complete
- FIMS
- Spreadsheet

**SAMUEL L. ABRAMS FOUNDATION  
DEADLINE MAY 31**

New Applicant    Re-applicant

**CHECKLIST:**

Graduated from one of the following schools:

- |   |  |
|---|--|
| <input type="checkbox"/> Bishop McDevitt          | <input type="checkbox"/> Middletown                            |
| <input type="checkbox"/> Camp Hill                | <input type="checkbox"/> Red Land                              |
| <input type="checkbox"/> Cedar Cliff              | <input type="checkbox"/> Sci-Tech                              |
| <input type="checkbox"/> CD East                  | <input type="checkbox"/> Steel-High                            |
| <input type="checkbox"/> Central Dauphin          | <input type="checkbox"/> Susquehanna Township                  |
| <input type="checkbox"/> Cumberland Valley        | <input type="checkbox"/> Susquenita                            |
| <input type="checkbox"/> Harrisburg               | <input type="checkbox"/> Harrisburg Academy                    |
| <input type="checkbox"/> Lower Dauphin            | <input type="checkbox"/> Rabbi David L. Silver Yeshiva Academy |
| <input checked="" type="checkbox"/> Mechanicsburg | <input type="checkbox"/> Trinity                               |

Completed Application

Other Scholarship Information

Student Resume

FAFSA SAR EFC: 18155

Letter of Extenuating Circumstances

Essay

Tuition Bill

Financial Aid Information

Transcript GPA: \_\_\_\_\_

School Counselor Form (only if HS applicant)

**NOTES:**

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# Samuel L. Abrams Foundation Scholarship Application

## Applicant Information

Please use proper capitalization, i.e. John A. Smith, not JOHN A SMITH or john a smith

Prefix e.g., Mr., Miss, Ms., Mrs. Miss	First Name Molly	Middle Initial	Last Name Snyder	Suffix e.g., Jr.
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Pronoun  
e.g., he, she, they  
she

Nickname or Preferred Name  
Molly

Address 1 Street Address 19 Kingswood Drive	Address 2 Apt./Unit #
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City Mechanicsburg	County Cumberland County	State Pennsylvania	Zip Code 17055
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Phone  
XXX-XXX-XXXX  
7175719543

E-mail Address  
Please provide an e-mail address you will continue to check throughout the year  
molly.lahoma172@gmail.com

Date of Birth January 07, 2002	Gender Female	U.S. Citizen Yes
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Are you Married? No	Name of Spouse if applicable
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Number of Dependents and Age(s)  
if applicable

## Family Information

Parent 1 / Caregiver 1

Relationship to Applicant

Mother

Prefix First Name Middle Initial Last Name  
e.g., Mr., Miss, Ms., Mrs. Melanie Snyder  
Mrs.

Pronoun  
e.g., he, she, they  
she

Employer Occupation  
Ski Roundtop Accounts Payable

Address 1 Address 2  
Home Address Apt./Unit #  
19 Kingswood Drive

City State Zip  
Mechanicsburg PA 17055

Home Phone Work Phone Cell Phone  
xxx-xxx-xxxx xxx-xxx-xxxx xxx-xxx-xxxx  
7175719543

E-mail Address

Please provide an e-mail address that is checked regularly  
daisymoonz@verizon.net

Parent 2 / Caregiver 2

Relationship to Applicant

Father

Prefix First Name Middle Initial Last Name  
e.g., Mr., Miss, Ms., Mrs. William Snyder  
Mr. E

Pronoun  
e.g., he, she, they  
he

Employer Occupation  
ArcelorMittal Steelworker

Address 1 Address 2  
Home Address Apt./Unit #  
19 Kingswood Drive

City State Zip  
Mechanicsburg PA 17055

Home Phone Work Phone Cell Phone

XXX-XXX-XXXX  
7175719543

XXX-XXX-XXXX

XXX-XXX-XXXX

### E-mail Address

Please provide an e-mail address that is checked regularly

daisymoonz@verizon.net

Father Deceased?

No

Mother Deceased?

No

Parents Divorced?

No

Are you the first in your family to attend college?

Yes

List names, ages, and educational levels of siblings living in your household:

Name, Age, Grade, or Year in College & Name of College

Melanie Snyder

Please provide any additional information regarding your family, if necessary:

As of June 1, 2020 my mothers job will be eliminated.

## High School Information

High School Attending

Mechanicsburg Area Senior High School

High School Address 1

500 S Broad Street

High School Address 2

City

Mechanicsburg

State

Pennsylvania

Zip Code

17055

High School Graduation Date

June 01, 2020

Cumulative GPA

87.0264

Cumulative Class Rank

147

Total H.S. Class Size

288

Please provide your school counselor's name and contact information below.

Prefix

e.g., Mr., Miss, Ms., Mrs.

Mr.

First Name

Joel

Last Name

Covert

Phone

XXX-XXX-XXXX

717-691-4530

E-mail Address

jcovert@mbgsd.org

## Post-Secondary Information & Educational Financing

Please list the colleges/universities to which you have applied and indicate your acceptance status.

College/University 1

Acceptance Status

Lock Haven University Yes

College/University 2 Acceptance Status  
<None>

College/University 3 Acceptance Status  
<None>

Year in college for upcoming school year  
Freshman

Major and minor field of study  
Special Education K-4

Check this box if you plan to be a full-time student.  
Yes

If you do not plan to be a full-time student,  
how many credit hours are you planning to take?

Expected College Graduation Date  
June 01, 2024

Please provide educational financing information for the school you will attend in the fall.  
If you are unsure of what school you will attend, please provide information for your first choice school.

ALL DOLLAR FIGURES SHOULD REFLECT EXPENSES FOR ONE FULL ACADEMIC YEAR

School  
Lock Haven University

Expected Annual Tuition & Fees  
Total dollar figure for both fall & spring semesters  
28000

Expected Annual Room & Board  
Total dollar figure for both fall & spring semesters  
11000

Expected Annual Textbooks & Supplies  
Total dollar figure for both fall & spring semesters  
4000

Where do you plan to live during the school year?  
Please indicate if you will be living in campus housing, commuting, living off campus etc.  
on campus

Are you financing your own education?  
Yes

How much of your education are you financing?  
dollar figure for one academic year  
28296

If no or partial, who is helping to finance your education?

How much of your education are they supporting per year?  
dollar figure for one academic year

Do you plan to take out student loans for the upcoming year?  
Loans include federal subsidized, unsubsidized, and private loans  
Yes

If yes, how much?  
dollar figure  
28296

Do you plan to have employment during the academic year?  
Employment includes participating in a work study program and private employment  
Yes

If yes, how many hours will you work per week? How  
much will you earn?  
Include hours and dollar figure

Use the space below to describe how you will finance the total of your education and provide any clarification needed for the answers given above.

I am going to take out student loans. I am responsible for paying for my education, my parents will not be helping me.





## STUDENT RESUME

List any school, community, and faith-based activities in which you have been involved in the last four years and note if it was while in high school (HS) or college (C). Be sure to include leadership roles and number of hours (hours per week/month/year, whichever is applicable). Make additional copies of this page if more space is needed.

School Activities	Timeframe		FR	SO	JR	SR	Total # Hours	
	HS	C						Month(s) & Year(s)
<u>Cross Country</u>	X		<u>Aug-Nov 2016-2020</u>	X	X	X	X	<u>20+ /week</u>
<u>Swimming</u>	X		<u>Nov-Feb 2016-2020</u>	X	X	X	X	<u>20+ /week</u>
<u>Track and Field</u>	X		<u>Mar-June 2016-2020</u>	X	X	X	X	<u>20+ /week</u>
<u>PALS at MASH</u>	X		<u>Aug-June 2018,2019,2020</u>			X	X	<u>20+ hours</u>
<u>Special Olympics Buddy</u>	X		<u>Sept, Jan, Mar 2018-2020</u>	X	X	X		<u>56 hours</u>
_____			_____					_____
_____			_____					_____

Community & Faith-based Activities	Timeframe		FR	SO	JR	SR	Total # Hours	
	HS	C						Month(s) & Year(s)
<u>Youth Group</u>	X		<u>Every Sunday all year</u>	X	X	X	X	<u>100+</u>
<u>Voluntary Youth Mission Trip</u>	X		<u>One week in the summer</u>	X	X			<u>100+</u>
_____			_____					_____
_____			_____					_____
_____			_____					_____
_____			_____					_____

Awards & Honors	HS	C	FR	SO	JR	SR	Year
<u>Cross Country Varsity Letter</u>	X		X	X	X	X	<u>2016-2020</u>
<u>Swimming Varsity Letter</u>	X		X	X	X	X	<u>2016-2020</u>
<u>Track and Field Varsity Letter</u>	X		X	X	X	X	<u>2016-2020</u>
<u>High Honor Athlete Award</u>	X					X	<u>2020</u>
_____							_____
_____							_____

Work Experience		Average Hours	
Employer	Position	Dates of Employment	Worked Per Week
<u>Roundtop Mountain Resort</u>	<u>Rentals Tech</u>	<u>2018-2020</u>	<u>16 Hours</u>
_____	_____	_____	_____
_____	_____	_____	_____

## Processed Information

### 2020-2021 Electronic Student Aid Report (SAR)

The SAR summarizes the information you submitted on your 2020-2021 Free Application for Federal Student Aid (FAFSA).

Application Receipt Date: 10/12/2019	XXX-XX-7839 SN 01
Processed Date: 10/15/2019	EFC: 18155
	DRN: 9233

▼ Collapse All

#### ► Comments About Your Information

Learn about [federal tax benefits for education](#), including the *American Opportunity Tax Credit* (AOTC).

Based on the information we have on record for you, your EFC is 18155. You are not eligible for a Federal Pell Grant but you may be eligible for other aid. Your school will use your EFC to determine your financial aid eligibility for other federal grants, loans, and work-study, and possible funding from your state and school.

WHAT YOU MUST DO NOW (Use the checklist below to make sure that all of your issues are resolved.)

If you need to make corrections to your information, click 'Make FAFSA Corrections' on the 'My FAFSA' page using your FSA ID. If you need additional help with your SAR, contact your school's financial aid office or click the 'Help' icon on the FAFSA home page. If your mailing address or e-mail address changes, you can make the correction online.

#### ► FAFSA Data

Assumed fields, based on the data you entered, are marked with an "\*" (asterisk) sign.

1. Student's Last Name:	SNYDER
2. Student's First Name:	MOLLY
3. Student's Middle Initial:	L
4. Student's Permanent Mailing Address:	19 KINGSWOOD DRIVE
5. Student's Permanent City:	MECHANICSBURG
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17055
8. Student's Social Security Number:	XXX-XX-7839
9. Student's Date of Birth:	01/07/2002
10. Student's Telephone Number:	(717) 439-0206
11. Student's Driver's License Number:	32946127
12. Student's Driver's License State:	PA
13. Student's E-mail Address:	molly.lahoma172@gmail.com
14. Student's Citizenship Status:	YES, I AM A U.S. CITIZEN (OR U.S. NATIONAL)
15. Student's Alien Registration Number:	
16. Student's Marital Status:	I AM SINGLE
17. Student's Marital Status Date:	
18. Student's State of Legal Residence:	PA



19. Was Student a Legal Resident before January 1, 2019?	YES
20. Student's Legal Residence Date:	
21. Is the Student Male or Female?	FEMALE
22. Register Student With Selective Service System?	NO
23. Drug Conviction Affecting Eligibility?	ELIGIBLE FOR AID
24. Parent 1 Educational Level:	HIGH SCHOOL
25. Parent 2 Educational Level:	HIGH SCHOOL
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	MECHANICSBURG AREA SHS
27b. Student's High School City:	MECHANICSBURG
27c. Student's High School State:	PA
28. First Bachelor's Degree before 2020-2021 School Year?	NO
29. Student's Grade Level in College in 2020-2021:	NEVER ATTENDED COLLEGE/1ST YR.
30. Type of Degree/Certificate:	1ST BACHELOR'S DEGREE
31. Interested in Work-study?	DON'T KNOW
32. Student Filed 2018 Income Tax Return?	ALREADY COMPLETED
33. Student's Type of 2018 Tax Form Used:	Transferred from the IRS
34. Student's 2018 Tax Return Filing Status:	SINGLE
35. Student Filed Schedule 1?	
36. Student's 2018 Adjusted Gross Income:	Transferred from the IRS
37. Student's 2018 U.S. Income Tax Paid:	Transferred from the IRS
38. Student's 2018 Income Earned from Work:	Transferred from the IRS
39. Spouse's 2018 Income Earned from Work:	
40. Student's Total of Cash, Savings, and Checking Accounts:	\$74
41. Student's Net Worth of Current Investments:	\$0
42. Student's Net Worth of Businesses/Investment Farms:	\$0
43a. Student's Education Credits:	Transferred from the IRS
43b. Student's Child Support Paid:	\$0
43c. Student's Taxable Earnings from Need-Based Employment Programs:	\$0
43d. Student's College Grant and Scholarship Aid Reported to IRS as Income:	\$0
43e. Student's Taxable Combat Pay Reported in AGI:	\$0
43f. Student's Cooperative Education Earnings:	\$0
44a. Student's Payments to Tax-Deferred Pensions & Retirement Savings:	\$0
44b. Student's Deductible Payments to IRA/Keogh/Other:	Transferred from the IRS

44c. Student's Child Support received:	\$0
44d. Student's Tax Exempt Interest Income:	Transferred from the IRS
44e. Student's Untaxed Portions of IRA Distributions and Pensions:	Transferred from the IRS
44f. Student's Housing, Food, & Living Allowances:	\$0
44g. Student's Veterans Noneducation Benefits:	\$0
44h. Student's Other Untaxed Income or Benefits:	\$0
44i. Money Received or Paid on Student's Behalf:	\$0
45. Student Born Before January 1, 1997?	NO
46. Is Student Married?	NO
47. Working on Master's or Doctorate in 2020-2021?	NO
48. Is Student on Active Duty in U.S. Armed Forces?	NO
49. Is Student a Veteran?	NO
50. Does Student Have Children He/She Supports?	NO
51. Does Student Have Dependents Other than Children/Spouse?	NO
52. Parents Deceased?/Student Ward of Court?/In Foster Care?	NO
53. Is or Was Student an Emancipated Minor?	NO
54. Is or Was Student in Legal Guardianship?	NO
55. Is Student an Unaccompanied Homeless Youth as Determined by High School/Homeless Liaison?	NO
56. Is Student an Unaccompanied Homeless Youth as Determined by HUD?	NO
57. Is Student an Unaccompanied Homeless Youth as Determined by Director of Homeless Youth Center?	NO
58. Parents' Marital Status:	MARRIED OR REMARRIED
59. Parents' Marital Status Date:	10/2000
60. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-0720
61. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	SNYDER
62. Parent 1 (Father's/Mother's/Stepparent's) First Name Initial:	W
63. Parent 1 (Father's/Mother's/Stepparent's) Date of Birth:	09/12/1975
64. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-5680
65. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	SNYDER
66. Parent 2 (Father's/Mother's/Stepparent's) First Name Initial:	M
67. Parent 2 (Father's/Mother's/Stepparent's) Date of Birth:	04/29/1974
68. Parents' E-mail Address:	courier5505@verizon.net
69. Parents' State of Legal Residence:	PA
70. Were Parents Legal Residents Before January 1, 2015?	YES

71. Parents' Legal Residence Date:	
72. Parents' Number of Family Members in 2020-2021:	4
73. Parents' Number in College in 2020-2021 (Parents Excluded):	1
74. Parents Received Medicaid or Supplemental Security Income?	NO
75. Parents Received SNAP?	NO
76. Parents Received Free/Reduced Price Lunch?	NO
77. Parents Received TANF?	NO
78. Parents Received WIC?	NO
79. Parents Filed 2018 Income Tax Return?	ALREADY COMPLETED
80. Parents' Type of 2018 Tax Form Used:	Transferred from the IRS
81. Parents' 2018 Tax Return Filing Status:	MARRIED-FILED JOINT RETURN
82. Parents Filed Schedule 1?	
83. Is Parent a Dislocated Worker?	
84. Parents' 2018 Adjusted Gross Income:	Transferred from the IRS
85. Parents' 2018 U.S. Income Tax Paid:	Transferred from the IRS
86. Parent 1 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$90,616
87. Parent 2 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$12,882
88. Parents' Total of Cash, Savings, and Checking Accounts:	
89. Parents' Net Worth of Current Investments:	
90. Parents' Net Worth of Businesses/Investment Farms:	
91a. Parents' Education Credits:	Transferred from the IRS
91b. Parents' Child Support Paid:	\$0
91c. Parents' Taxable Earnings from Need-Based Employment Programs:	\$0
91d. Parents' College Grant and Scholarship Aid Reported to IRS as Income:	\$0
91e. Parents' Taxable Combat Pay Reported in AGI:	\$0
91f. Parents' Cooperative Education Earnings:	\$0
92a. Parents' Payments to Tax-Deferred Pensions & Retirement Savings:	\$0
92b. Parents' Deductible Payments to IRA/Keogh/Other:	Transferred from the IRS
92c. Parents' Child Support Received:	\$0
92d. Parents' Tax Exempt Interest Income:	Transferred from the IRS
92e. Parents' Untaxed Portions of IRA Distributions and Pensions:	Transferred from the IRS
92f. Parents' Housing, Food, & Living Allowances:	\$0
92g. Parents' Veterans Noneducation Benefits:	\$0
92h. Parents' Other Unearned Income or Benefits:	\$0



93. Student's Number of Family Members in 2020-2021:	
94. Student's Number in College in 2020-2021:	
95. Student Received Medicaid or Supplemental Security Income?	NO
96. Student Received SNAP?	NO
97. Student Received Free/Reduced Price Lunch?	NO
98. Student Received TANF?	NO
99. Student Received WIC?	NO
100. Is Student or Spouse a Dislocated Worker?	
101a. First Federal School Code:	003323
101b. First Housing Plans:	ON CAMPUS
101c. Second Federal School Code:	003326
101d. Second Housing Plans:	ON CAMPUS
101e. Third Federal School Code:	003315
101f. Third Housing Plans:	ON CAMPUS
101g. Fourth Federal School Code:	G03269
101h. Fourth Housing Plans:	ON CAMPUS
101i. Fifth Federal School Code:	002734
101j. Fifth Housing Plans:	ON CAMPUS
101k. Sixth Federal School Code:	
101l. Sixth Housing Plans:	
101m. Seventh Federal School Code:	
101n. Seventh Housing Plans:	
101o. Eighth Federal School Code:	
101p. Eighth Housing Plans:	
101q. Ninth Federal School Code:	
101r. Ninth Housing Plans:	
101s. Tenth Federal School Code:	
101t. Tenth Housing Plans:	
102. Date Completed:	10/12/2019
103. Signed By:	BOTH STUDENT AND PARENT
104. Preparer's Social Security Number:	
105. Preparer's Employer Identification Number (EIN):	
106. Preparer's Signature:	

The table shows the [graduation, retention, and transfer rates](#) for the schools you selected. Go to the [College Scorecard](#) Web site for complete information.

School Name	Graduation Rate	Retention Rate	Transfer Rate	Additional Information from <i>College Scorecard</i>
LOCK HAVEN UNIV OF PENNSYLVANIA	52%	72%	30%	N/A
SHIPPENSBURG UNIVERSITY	54%	73%	33%	N/A
BLOOMSBURG UNIVERSITY OF PA	60%	75%	29%	N/A
GROVE CITY COLLEGE	82%	91%	8%	N/A
HOUGHTON COLLEGE	73%	83%	0%	N/A

> Your Financial Aid History Information

The information below is the total amount of student loans that you owe. These loans are administered by the U.S. Department of Education (ED). You should confirm that these loan totals are correct. You can view details on the individual loans that make up these totals at the [National Student Loan Data System \(NSLDS\)](#) Web site. If you feel that the amounts listed on this page are incorrect, or you have other questions related to a loan, you should contact the loan servicer indicated on the NSLDS Web site. You can obtain general information about each of the types of loans that are listed below by visiting our [StudentAid.gov](#) Web site.

Note that the "Subsidized" and "Unsubsidized" amounts include the appropriate portions of any Consolidation Loans you may have. If there is an amount listed for "Unallocated Consolidation Loans" it is because we could not determine whether those balances were subsidized or unsubsidized.

Remember you are responsible for repaying all of the amounts that you borrow, plus interest. As a general rule, with an assumed interest rate of 5%, the monthly payment amount over a ten-year repayment period would be approximately \$10.61 for every \$1,000 that you borrowed. Of course your actual repayment amount will depend upon how much you borrow, the interest rate when you enter repayment, and how long your repayment term is.

Total Amount of Loans Outstanding -			
FFEL (Bank Loans) and/or Direct Loans:	Total Principal Balance	Remaining Amount to be Disbursed	Total
Subsidized Loans:			
Unsubsidized Loans:			
Combined Loans:			
Unallocated Consolidation Loans:			
Federal Perkins Loan Amounts:			
Total Outstanding Principal Balance:			
2020-2021 Loan Amount:			
TEACH Grants Converted to Direct Loans:			
Unsubsidized Loans:			

At this point, the school(s) listed on your application have access to your information. The school(s) may put together or change an aid package based on your Expected Family Contribution and notify you.

The amount of aid you receive from a school will depend on the cost of attendance at that school, your enrollment status (full-time, three-quarter-time, half-time, or less than half-time), Congressional appropriations, and other factors. Review your financial aid notification from the school(s) or contact the Financial Aid Administrator at the school(s).

Note: Your school has the authority to request copies of certain financial documents to verify information you reported on your application.

**To protect the confidentiality of your application data, you should never give, share, or disclose your FSA ID to anyone, including commercial service providers that provide assistance with the financial aid process. You should keep your FSA ID in a safe location**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0001. Public reporting burden for this collection of information is estimated to average 5 to 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. If you have comments or concerns regarding the status of your individual submission of this form, please contact the Federal Student Aid Information Center, P.O. Box 84, Washington, D.C. 20044 directly.

We may request additional information from you to process your application more efficiently. We will collect this additional information only as needed and on a voluntary basis.

By answering questions 101a through 101t, and signing the Free Application for Federal Student Aid, you give permission to the U.S. Department of Education to provide information from your application to the college(s) you entered. You also agree that such information is deemed to incorporate by reference the certification statement on the sign and submit page of the financial aid application. The certification statement can be viewed at [StudentAid.gov/2021/help/certification-statement](#).

**WARNING:** If you are convicted of drug distribution or possession for an offense that occurred while you were receiving Title IV aid, your eligibility for Title IV student financial aid is subject to suspension or termination. If your drug conviction status changes at any time during the 2020-2021 award year, you must update your answer to the drug conviction affecting eligibility question.

Molly Snyder

Samuel L. Abrams Foundation Scholarship

Attending a post secondary school will help me achieve a personal goal of mine to become a special education teacher. If I were to not attend college, that would steer me away from my dream of becoming a teacher. I also believe that it will open opportunities for me that I would not have if I did not attend. I believe that college will allow me to do more and experience more throughout my time there.

I plan on attending Lock Haven University and majoring in special education. When I first walked on campus, I immediately fell in love with the atmosphere. I liked the small campus and the idea that there will be smaller class sizes. While attending, I also plan on continuing my running career there as well. It helps that the coach and the team will help support me through my academics and my running. That idea it's self made deciding on a college a little easier.



Applicant's Name: \_\_\_\_\_

## HIGH SCHOOL STUDENT INFORMATION SHEET

*This page should be completed by your School Counselor.*

### General Student Information

High School Attended/Attending: \_\_\_\_\_

High School Address: \_\_\_\_\_  
Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

H.S. Graduation Date: \_\_\_\_\_ Cumulative Class Rank: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ Total H.S. Class Size: \_\_\_\_\_

### Attendance Information

Current School Year: # of Days Absent: \_\_\_\_\_ # of Days Tardy: \_\_\_\_\_

Previous School Year: # of Days Absent: \_\_\_\_\_ # of Days Tardy: \_\_\_\_\_

### Test Scores Information

SAT Reading: \_\_\_\_\_ Math: \_\_\_\_\_ Date: \_\_\_\_\_

Reading: \_\_\_\_\_ Math: \_\_\_\_\_ Date: \_\_\_\_\_

Reading: \_\_\_\_\_ Math: \_\_\_\_\_ Date: \_\_\_\_\_

ACT Composite: \_\_\_\_\_ Date: \_\_\_\_\_

### Signature Information

The school related information provided above is accurate and true to the best of my knowledge.

High School Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

High School Counselor Printed Name: \_\_\_\_\_

High School Counselor Email Address: \_\_\_\_\_