## **COLLEGE** Report

This form must accompany an of cial copy of your transcript and must be completed by a college of cial(s) who has access to your academic reand your disciplinary recordlease follow these steps to ensure the form is completed accurately and in its entirety. Step 1: Complete all relevant below, including the signature statement. Step 2: Give this form to a dean or college of cial who has access to your academic record and ask the plete the academic portion of this form. Step 3: If the of cial completing the academic portion does not also have access to your disciplinary reconditional to securely forward the form to a second of cial who can answer those questions before duplicating this form and mailing it to your coopies of your of cial transcript(s).

Cumulative G	 P <u>A:</u> on asc	ale, covering a period f <u>ro</u>			SchoolSe	al
			(mm/yyyy) (	mm/yyyy)		
			(mm/s	уууу)		
If you know this student, please indicate for how long and in what context						
If you know this student, what are the rst words that come to your mind to describe this student?						
Compared to other students in his or her class year, how do you rate this student in terms of:						
	1				T	
	Academic achievement					
	Extracurricular accomplish					
	Personal qualities and cha	aracter				
Please provide comments that will help us differentiate this student from others. Feel free to attach an additional sheet or another reference prepared for this student. We especially welcome a broad-based assessment and encourage you to consider describing or addressing:  The applicant's academic, extracurricular, and personal characteristics.  Relevant context for the applicant's performance and involvement, such as particularities of family situation would responsible from circumstances, either positive or negative.  Observed problematic behaviors, perhaps separable from academic performance, that an admission committee should explore further.						
If you are completing only the questions pertaining to the applicant's disciplinary record, please provide the following information:  College Of cial's Name (Mr./Mrs./Ms./Dr.)						
	(					

No