common app

SCHOOL REPORT

SR

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 _____

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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

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