

GUIDANCE COUNSELOR REPORT (REQUIRE

APPLICANT

Social Security # _

Please complete the top four lines of the report and give it to your guidance counselor for completion. We have enclosed an envelope on which we suggest you place a stamp and then give to your counselor for the return of this information.

Name			
	last	first	middle initial
Permanent Address			
		number and street	
town/city		county	state
Phone ()		
area code			

_____/ _____

GUIDANCE COUNSELOR

Please complete this report and return it to us at the address at bottom left. You should enclose a transcript which includes courses in progress. Notation of honors, accelerated, or Advanced Placement courses is requested. Test results, such as scores on SAT I/II and ACT tests should also be included. If possible, we would appreciate your sending us an explanation of the grading system your school uses and a school profile. Confidentiality: Your comments will be held in strictest confidence during the selection process and they will not become part of the applicant's file if he/she matriculates at Marietta College.

/

	Name Position <i>please type or print</i>		
	please type or print		
	Secondary School		
	School Address		
	E-mail Address		
	Office Telephone / School CEEB/ACT Code		
	The candidate's grade point average (G.P.A.) is on a 4.0 scale.		
	This candidate ranks from the top in a class numbering		
MARIETTA COLLEGE	If precise rank is not available, please indicate rank to the nearest tenth from the top		
OFFICE OF ADMISSION	This rank is (check one) \Box weighted \Box not weighted. If your school does not rank, please check. \Box		
215 FIFTH STREET	Of this candidates graduating class,% plan to attend a four-year college.		
MARIETTA, OHIO 45750-4005	of this candidates graduating class, /s plan to attend a roar year conege.		
740-376-4600	Is the curriculum pursued by this candidate (check one): \Box average \Box demanding \Box unusually demanding		
800-331-7896			
FAX 740-376-8888	In what context(s) have you known the applicant?8		

zip

PROFICIENCY EXAMINATIONS

□ This student has passed the proficiency tests required by our school district/county/state/etc.

□ This student did not pass the following proficiency tests required by our state.

□ Our state does not require proficiency examinations.

EVALUATION

Please write a candid evaluation of the applicant. We welcome all information that will help us gauge the academic potential of this candidate and differentiate him/her from others.

RATINGS

Please evaluate this candidate in comparison to other college-bound students you have encountered using the following scale:

1 — Truly Outstanding	2 — Excellent (top 10%)	3 — Good (above averag	ge) 4 — Average 5 -	— Below Average
Genuine interest in learnin	g		Self-confidence	
Academic potential			Emotional maturity	
Commitment to a rigorous college preparatory curricu			Seriousness about the ent college selection process	ire
Leadership			Respect accorded by the fa	aculty

SIGNATURE				_ DATE	
I recommend this stud	lent				
□ enthusiastically	□ strongly	\Box fairly strongly	\Box with reservation		
You may call me for additional information phone number					

REMINDER: PLEASE RETURN AS SOON AS POSSIBLE, BUT NOT LATER THAN **APRIL 15** FOR GENERAL ADMISSION OR **FEBRUARY 1** IF THE APPLICANT WISHES TO BE CONSIDERED FOR ACADEMIC SCHOLARSHIPS.