

Completion of this page is optional, and used only to assist us in processing your application. If you have already begun university study, please skip this page.

High School Course Report

							1
Section A: To be completed by the applicant.							
Student's name:					Birth date:		
SURNAME, GIVEN NAME, MIDDLE NAME						MM/DD/YYYY	
Please estimate the approximate number of semester course units in each area below that you have successfully completed or will complete by the time you graduate from high school. Use the following conversion in completing the table below:							
			1 year	1 sem			
	4-5 hrs p	4-5 hrs per week in class		1			
	2-3 hrs p	er week in class	1	.5			
Subjects	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13 (IF TAKEN)	Total Units
Mathematics		·	•				
Algebra I							
Geometry							
Algebra II							
Trigonometry							
Calculus							
Science							
Non-Laboratory Sciences							
Biology							
Chemistry							
Physics							
Social Studies					T	1	
History, Civics, Geog, etc.							
Languages					T	1	
English							
Other:							
Other:							
Section B: To be completed by the high school principal, headmaster, or guidance counselor:							
Please check the information completed by the applicant above for accuracy. To fairly evaluate this applicant's academic qualifications, we need information on your school's grading system and practices. Please complete as much of the following as possible.							
School's grading scale Lowest subject passing grade							
School's average grade/mark	Score required for graduation/promotion						
Applicant's cumulative grade average Applicant's rank in class							
RANK / CLASS SIZE (IF AVAILABLE)							
I verify that the information in Sections A and B above is correct.							
Signature and title of school official							
Name of high school Date:							