

Summer Engineering Institute 2014 Transcript Release Form

Name of Applicant:					
Home Address:					
	OR INFORMATION RELEASE I forward it to your guidance couns		npletion.		
I hereby authorize my hig	gh school to release the informatio	n requested below.			
Student's Signature:			Date:		
SCHOOL INFORMAT This section must be con	TION: mpleted by a guidance counselor	:			
Type of High School: Current Grade Level:		Parochial			
Name of High School:					
College Board School C	Code: (six digits)				
High School Address: _	Number & Street	City	State	Zip Code	
Class Rank:	Class Size:	GPA:	Scale:		
STANDARDIZED TES PSAT Critical Reading: PSAT Math: PSAT Writing:	SAT Critical F SAT Math:	Reading:	PLAN: ACT:		
CERTIFICATION: I hereby certify that the in	nformation I have provided is accu	rate and true as of the	ne date indicated bel	ow.	
Name of Counselor/Adv	visor:				
Signature of Counselor	:		Date:		
	ISSION INSTRUCTIONS: upload form along with an officia	al high school trans	cript and school pi	ofile (you should have r	eceived

Official Transcripts must be uploaded by Midnight (EST) April 24th, 2014.

*ALL applicants will be notified via email by 11pm (EST) Tuesday, May 9th

Please direct all questions to GTSEI@coe.gatech.edu