Request for High School Transcript

(Transfer applicants who have completed at least 24 semester hours need not complete this portion of the application.)

Student’s Name _____________________________________________________________________________________     ____   ____   ____   /   ____   ____   /   ____   ____   ____   ____

High School Name ___________________________________________________________________________________________________________________________

This section to be completed by the student before giving form to high school counselor.

This section to be completed by high school counselor and returned to Radford University.

Enclose a transcript that includes the most recent grading period.

HIGH SCHOOL ETS CODE (CEEB)

COUNSELOR’S NAME

COUNSELOR’S TELEPHONE NUMBER

STUDENT’S GRADUATION DATE

CLASS RANK AND SIZE OF CLASS

NUMBER OF SEMESTERS USED TO CALCULATE RANK

STUDENT’S GPA

PLEASE INDICATE YOUR SCHOOL’S GRADING SYSTEM (GIVE LETTER GRADE EQUIVALENT IF NUMERIC GRADES ARE USED)

If available, we would appreciate a copy of the school’s profile.

A = ______________________________
B = ______________________________
C = ______________________________
D = ______________________________
F = ______________________________

School’s lowest passing mark. ____________________________  On what point value is GPA based? (i.e.) 4.0, 5.0 etc. ______________________________

SAT I:  CRITICAL READING ___________ MATH ___________ WRITING ___________ ACT COMPOSITE (IF AVAILABLE): ___________

HAS THE STUDENT REGISTERED AT ANY COLLEGE OR INSTITUTION?  If so, where?

________________________________________________________________________________________________________________________________________________________

PLEASE WRITE COMMENTS ON BACK OF THIS SHEET