

2011-12 FIRST-YEAR APPLICATION

For Spring 2012 or Fall 2012 Enrollment

ADDIICANT

	APPLI	CANT		
Legal Name Last/Family/Sur (Enter name exactly as it appears on officia	al documents.)	First/Given	Middle (complete)	Jr., etc.
Preferred name, if not first name (only one)		Former last name(s)		
Birth Date O Fer	male \bigcirc Male	US Social Security Numb	er, if any	
mm/dd/yyyy		Required for US Citize	ns and Permanent Residents applying for t	inancial aid via FAFS/
Preferred Telephone O Home O Cell Home ()		Cell () rea/Country/City Code	
E-mail Address		IM Address		
Permanent home address				
Number & Street			Apartment #	
City/Town Co	ounty or Parish	Sta	te/Province Country	ZIP/Postal Code
If different from above, please give your current mailing addre	ss for all admis	ssion correspondence.	(from	
Current mailing address			(mm/dd/yyyy)	(mm/dd/yyyy)
Current mailing address			Apartment #	
City/Town Cc	ounty or Parish	Sta	te/Province Country	ZIP/Postal Code
If your current mailing address is a boarding school, include name o	f school here: _			
	FUTURI			
Your answers to these questions will vary for different colleges. If the chose not to ask that question of its applicants.	online system di	d not ask you to answer son	ne of the questions you see in this sec	tion, this college
College		Deadline	mm/dd/yyyy	
Entry Term: O Fall (Jul-Dec) O Spring (Jan-Jun)			r need-based financial aid?	\bigcirc Yes \bigcirc No
Decision Plan			r merit-based scholarships?	\bigcirc Yes \bigcirc No
Academic Interests		Do you intend to be a full	a degree program your first year?	\bigcirc Yes \bigcirc No \bigcirc Yes \bigcirc No
			llege housing?	
Career Interest			e you intend to earn?	
		what is the highest degre		
	DEMOGI	RAPHICS		
Citizenship Status		1. Are you Hispanic/Lating)?	
Non-US Citizenship		\bigcirc Yes, Hispanic or Latino	(including Spain) \bigcirc No $$ If yes, please des	scribe your background.
		2. Regardless of your ans	wer to the prior question, please indicat	te how you identify
Birthplace City/Town State/Province	Country		more and describe your background.) ka Native (including all Original Peoples o	f the Americas)
Years lived in the US?Years lived outside the US?	Country		No If yes, please enter Tribal Enrollment Numb	
Language Proficiency (Check all that apply.)		.,	2	
(S(Speak) R(Read) W(Write) F(First Language) H(Spoken at Home) (S (R	W F H	O Asian (including Indian	subcontinent and Philippines)	
0 0	000			
0 0	000	O Black or African Americ	an (including Africa and Caribbean)	
0 0	000		or Desifie Johnston (Original Desition)	
Optional The items with a gray background are optional. No info provide will be used in a discriminatory manner.	rmation you	• Native Hawalian or Oth	er Pacific Islander (Original Peoples)	
Religious Preference		O White (including Middle	Eastern)	

US Armed Services veteran status

FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section.

With whom do you make your permanent home?	O Parent 1 O Parent 2 C	•		O Other
Parent 1: O Mother O Father O Unknown	,		ather O Unknown	,
Is Parent 1 living? \bigcirc Yes \bigcirc No (Date Deceased) 	Is Parent 2 living? O Yes O	No (Date Deceased) /
Last/Family/Sur First/Given Mid	ddle Title (Mr./Mrs./Ms./Dr.)	Last/Family/Sur F	irst/Given Middle	Title (Mr./Mrs./Ms./Dr.)
Country of birth		Country of birth		
Home address if different from yours		Home address if different from	n yours	
Preferred Telephone: O Home O Cell O Work (Country/City Code	Preferred Telephone: O Home	Area/Cour	_)
Occupation		Occupation Employer		
Employer		College (if any)		CEEB
College (if any)				
Degree				
Graduate School (if any)		Graduate School (if any)		
Degree	Year	Degree		Year
Legal Guardian (if other than a parent) Relationship to you	ddle Title (Mr./Mrs./Ms./Dr.)	Siblings Please give names and ages of grades K-12 (or international eq attended or are currently attend institution, degree earned, and a three siblings, please list them i	uivalent), list their grade le ing college, give the name approximate dates of atten	evels. If they have is of the undergraduate dance. If more than
		Name	Age & Grade	Relationship
		College Attended		CEEB
Preferred Telephone: \bigcirc Home \bigcirc Cell \bigcirc Work ()	Degree earned or expected	Dates	
E-mail	Country/City Code			
		Name	Age & Grade	Relationship
Occupation	······	College Attended		CEEB
Employer		Degree earned	Dates	mm/yyyy – mm/yyyy
College (if any)	CEEB	or expected		
Degree	Year	Name	Age & Grade	Relationship
Graduate School (if any)	CEEB	College Attended		CEEB
Degree	Year	Degree earned or expected	Dates	mm/yyyy — mm/yyyy
Sprouse/Child		College Attended		CEEB
Marital Status		Degree Earned/Expected		Dates

If you have children, how many? _____

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Spouse's Name

EDUCATION

Entrv Date		Graduation I	Date	School Type:	○ Public	○ Charter	○ Independent	○ Religious	○ Home School
	mm/yyyy		Date	000000000000000000000000000000000				e nongroue	
Address	er & Street					C	EEB/ACT Code		
City/Town					State/Province		Country		ZIP/Postal Code
,	ame						Country		
			Telephone (Fax (
			rerepriorie (ea/Country/City Code	Number		a/Country/City Code	e Numb	er
Please list any	community progra	m/organizatior	that has provided free a	assistance with your a	pplication pr	ocess:			
lf your educati	on was or will be ir	nterrupted, plea	se indicate so here and	provide details in the	Additional In	formation sec	tion:		
Colleges & college campu		port all college	attendance (including or	nline) since 9 th grade a	<mark>ind indicate a</mark>	<mark>as College Co</mark>	urse (CO) or Enricl	<mark>nment Program (</mark>	EP) hosted on a
	iversity Name & CEEB/		Location (City, State/Provi			ce Candia Yes No — O O — O O — O O — O O			Degree Earned
Were you issu	ed a transcript for a	<mark>any work listed</mark>	above? O Yes O No	lf yes, please have ar	<mark>n official tran</mark>	script sent as	soon as possible		
Were you issu	ed a transcript for a	any work listed	above? OYes ONO	If yes, please have an		script sent as	soon as possible		

The self-reported information in this section is not intended to take the place of your official records. Please note the requirements of each institution to which you are applying and arrange for official transcripts and score reports to be sent from your secondary school and the appropriate testing agencies. Where "Best Scores" are requested, please report the highest individual scores you have earned so far, even if those scores are from different test dates.

Grades	Class Rank (if available)		Class Size	Weig	hted?	\bigcirc Yes \bigcirc N		GPA		_ Scale		Weighted? O Y	es 🔿 No
ACT	Exam Dates:	mm/yyyy	mm/yyyy	mm/yyyy		Best Scores: (so far)	COMP	mm/y	ууу	English		Math	mm/yyyy
							Reading		'yy	Science	mm/yyyy	Writing	mm/yyyy
SAT	Exam Dates:	mm/yyyy		mm/yyyy		Best Scores: (so far)	Critical Readir	ng mm/yy	 <i>yy</i>	Math		Writing	mm/yyyy
toefl/ Ielts	Exam Dates: _ (past & future)	mm/yyyy	mm/yyyy	mm/yyyy		Best Score: (so far)	Test	Score	,	mm/yyyy			
AP/IB/SAT Subjects	Best Scores: _ (per subject, so far)	mm/yyyy		Type & Subject			Score	mm/yyyy			Type & Subject		Score
		mm/yyyy		Type & Subject			Score	mm/yyyy			Type & Subject		Score
		mm/yyyy		Type & Subject			Score	mm/yyyy			Type & Subject		Score
	-	mm/yyyy		Type & Subject			Score	mm/yyyy			Type & Subject		Score

Current Courses Please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line.

Full Year/First Semester/First Trimester

Second Semester/Trimester

Third Trimester

or additional first/second term courses if more space is needed

Honors Briefly list any academic distinctions or honors you have received since the 9th grade or international equivalent (e.g., National Merit, Cum Laude Society).

S(School) S/R(State of Regional N(National) I(International)		
Grade level or	Honor	Highest Level of
post-graduate (PG)		Recognition
9 10 11 12 PG		S SAR M
00000		0000
00000		0000
00000		0000
00000		0000
00000		0000

EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE

Extraceunrileular Please list your principal extracurricular, volunteer, and work activities in their order of importance to you. Feel free to group your activities and paid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events, varsity letter, musical instrument, employer, etc.). To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.

Grade level or post-graduate (PG)	Approx time s		in the a	ou participate activity?	Positions held, honors whethers earned an employer	lf applicable, do you plan
9 10 11 12 PG	Hours per week	Weeks per year	School year	Summer/ School Break	rostions neu, nonors campeters camet an anpress	to participate in college?
00000			_ O	0		0
Activity						
00000			_ O	0		0
Activity						
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Activity						
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Activity						
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Activity						
00000			0	0		0
Activity						

WRITING

Please briefly elaborate on one of your extracurricular activities or work experiences in the space below.

Please write an essay of 250 – 500 words on a topic of your choice or on one of the options listed below, and attach it to your application before submission. Please
indicate your topic by checking the appropriate box. This personal essay helps us become acquainted with you as a person and student, apart from courses,
grades, test scores, and other objective data. It will also demonstrate your ability to organize your thoughts and express yourself. NOTE: Your Common Application
essay should be the same for all colleges. Do not customize it in any way for individual colleges. Colleges that want customized essay responses will ask for them on
a supplement form.

-) 1 Evaluate a significant experience, achievement, risk you have taken, or ethical dilemma you have faced and its impact on you.
- O Discuss some issue of personal, local, national, or international concern and its importance to you.
 - 3 Indicate a person who has had a significant influence on you, and describe that influence.
 - Describe a character in fiction, a historical figure, or a creative work (as in art, music, science, etc.) that has had an influence on you, and explain that influence.
- A range of academic interests, personal perspectives, and life experiences adds much to the educational mix. Given your personal background, describe an experience that illustrates what you would bring to the diversity in a college community or an encounter that demonstrated the importance of diversity to you.
- 6 Topic of your choice.

emode limitoritation Please attach a separate sheet if you wish to provide details of circumstances or qualifications not reflected in the application.

Disciplinary History

 \cap

- ① Have you ever been found responsible for a disciplinary violation at any educational institution you have attended 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 the institution. Yes No
- ② Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? O Yes O No [Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunded, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered "yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

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.

SIGNATURE

Application Fee P	If this college r	requires an a	application fee,	how will	you be	paying it?
-------------------	-------------------	---------------	------------------	----------	--------	------------

O Online Payment O Will Mail Payment O Online Fee Waiver Request O Will Mail Fee Waiver Request

Required S. ture

- I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institutions to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree, should the information I have certified be false.
- I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.
- I affirm that I will send an enrollment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]

Signature 🦄

mm/dd/yyyy

Date _

Common Application member institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.



2011-12 TEACHER EVALUATION

For Spring 2012 or Fall 2012 Enrollment

TO THE APPLICANT

After completing all the relevant questions below, give this form to a teacher who has taught you an **academic** subject (for example, English, foreign language, math, science, or social studies). **If applying via mail**, please also give that teacher stamped envelopes addressed to each institution that requires a Teacher Evaluation.

l egal Nam	e						 ○ Female ○ Mala
2090.100.11	Last/Family/Sur	(Enter name exactly as it appea	rs on official documents.)	First/Given	Middle (complete) Jr., etc.	$ \bigcirc$ Male
Birth Date		mm/dd/yyyy	<mark>(</mark>	AID			
		mm/dd/yyyy					
Address		Apartment #					
	Number & Street	Apartment #	City/Town	State/Province	Country	ZIP/Postal Code	
School you	now attend			CEE	B/ACT Code		
IMPORT	TANT PRIVACY N	DTICE: Under the terms of the	Family Educational Bigh	ts and Privacy Act (FFF	RPA) after you matriculate	you will have access to	this form
		ations and supporting docum					
		t save recommendations post access below, regardless of t			g/FERPA).		
⊖Yes, I	l do waive my righ	it to access, and I understand	I will never see this form	or any other recomm			
		right to access, and I may son institution at which I'm enroll				ig documents submitted	by me
	ed Signature 🖄		0.			Date	
	u						
			TO THE	TEACHER			
		embership finds candid evalu					
		should the student need add lege/university admission (remember to sign belo	w before
-	-	ls./Dr.)			ect Taught		
TEACHER 5 I			Please print or type	Subj			
Signature [@]	5					Date	
Signature_	3					Date	/уууу
Secondary	School						
occontrally							
School Add							
	1	Number & Street	City/Town	State/Province	Country	ZIP/Postal Code	
Teacher's T		_)			her's E-mail		
	Area/Col	untry/City Code	Number	Ext.			
Backgrou	und Informatio	n					

How long have you known this student and in what context?			
What are the first words that come to your mind to describe this student? $\ \ ,$			
In which grade level(s) was the student enrolled when you taught him/her?	9 09 010	011 012	O Other

List the courses in which you have taught this student, including the level of course difficulty (AP, IB, accelerated, honors, elective; 100-level, 200-level; etc.).

TE

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 l've encoun- tered (top 1%)
	Academic achievement							
	Intellectual promise							
	Quality of writing							
	Creative, original thought							
	Productive class discussion							
	Respect accorded by faculty							
	Disciplined work habits							
	Maturity							
	Motivation							
	Leadership							
	Integrity							
	Reaction to setbacks							
	Concern for others							
	Self-confidence							
	Initiative, independence							
	OVERALL							

Evaluation Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)



2011-12 TEACHER EVALUATION

For Spring 2012 or Fall 2012 Enrollment

TO THE APPLICANT

After completing all the relevant questions below, give this form to a teacher who has taught you an **academic** subject (for example, English, foreign language, math, science, or social studies). **If applying via mail**, please also give that teacher stamped envelopes addressed to each institution that requires a Teacher Evaluation.

Legal Name							○ Female – ○ Male
-	Last/Family/Sur	(Enter name exactly as it appears	on official documents.)	First/Given	Middle (complete)	Jr., etc.	
Birth Date			C	AID			
		mm/dd/yyyy					
Address							
	Number & Street	Apartment #	City/Town	State/Province	Country	ZIP/Postal Code	
School vou	now attend			CEE	EB/ACT Code		
			, ,	2 (RPA), after you matriculate you		this form
and all o	other recommenda	ations and supporting documen	ts submitted by you an	d on your behalf, unle	ss at least one of the following	is true:	
		save recommendations post-m access below, regardless of the			rg/FERPA).		
					endations submitted by me or o		
		ight to access, and I may some nstitution at which I'm enrolling			ommendations or supporting do ulate.	ocuments submitted	by me
Require	d Signature <u> </u>		4			_ Date	

TO THE TEACHER

The Common Application membership finds candid evaluations helpful in choosing from among highly qualified candidates. You are encouraged to keep this form in your private files for use should the student need additional recommendations. Please submit your references promptly, **and remember to sign below before mailing directly to the college/university admission office**. *Do not mail this form to The Common Application offices*.

Teacher's Name (Mr./Mrs./Ms./Dr.)	Subject Taught						
	Please print or type		0				
Signature 🕙				Date			
Secondary School				mm/dd/yyyy			
School Address	City/Town	State/Province	Country	ZIP/Postal Code			
Teacher's Telephone ()		Teac	cher's E-mail	217770Stat COUR			
Area/Country/City Code	Number	Ext.					

Background Information

ow long have you known this student and in what context?	
hat are the first words that says to your mind to describe this student?	
hat are the first words that come to your mind to describe this student?	
which grade level(s) was the student enrolled when you taught him/her? O 9 O 10 O 11 O 12 O 0ther	
st the courses in which you have taught this student, including the level of course difficulty (AP, IB, accelerated, honors, elective; 100-level, 200-level; etc.).	

TF

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 l've encoun- tered (top 1%)
	Academic achievement							
	Intellectual promise							
	Quality of writing							
	Creative, original thought							
	Productive class discussion							
	Respect accorded by faculty							
	Disciplined work habits							
	Maturity							
	Motivation							
	Leadership							
	Integrity							
	Reaction to setbacks							
	Concern for others							
	Self-confidence							
	Initiative, independence							
	OVERALL							

Evaluation Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)



2011-12 <mark>SCHOOL REPORT</mark>

For Spring 2012 or Fall 2012 Enrollment

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		·		·	•		○ Female
Last/Family/Sur	ır (Enter name exactly as it appe	ears on official documents.)	First/Given		Middle (complete,	e) Jr., etc.	$\longrightarrow \bigcirc$ Male
Birth Date	mm/dd/yyyy		CAID				
	mm/dd/yyyy						
Address		A vanden and H	011 ./T		21. I. (D	Country .	ZID/Dartal Code
		Apartment #	City/Town		State/Province	Country	ZIP/Postal Code
School you now attend				CEEB/ACT C	Code		
	lease indicate title, level (AF e semester on the appropria		tc.) and credit val	lue of all cov	ırses you are tak	ing this year. Indica	ite quarter
/First Semes	ter/First Trimester	Second Semest	ter/Second Trimeste	ar 💦	or adui. ^{fi} rst/s	Third Trimester	re space is needed
Rights and Privacy Act (F I further authorize the ad officials at my current an I understand that under t	IOTE: By signing this form, I au FERPA) so that my application dmission officers reviewing m and former schools should they the terms of the FERPA, after n my behalf, unless at least on	n may be reviewed by The ny application, including se ey have questions about the r I matriculate I will have a	e Common Application easonal staff emplo ne school forms sub- access to this form a	ion member ir oyed for the so omitted on my	institution(s) to whi sole purpose of eva y behalf.	nich I am applying. valuating applications,	, to contact
	not save recommendations post ccess below, regardless of the			p.org/FERPA)).		
○ No, I do <i>not waive</i> my	ight to access, and I understan ny right to access, and I may s institution at which I'm enrolli	someday choose to see thi	nis form or any other	er recommend			itted by me or

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 typ	<i><i><i><i>ie</i></i></i></i>		
Signature 🕙				Date
				mm/dd/yyyy
Title		School		
School Address				
Number & Street	City/Town	State/Province	Country	ZIP/Postal Code
School Website Address				
Counselor's Telephone ()		Counselor's Fax ()	
Area/Country/City Code	Number	Ext. Area/Co	untry/City Code	Number
School CEEB/ACT Code	Counselor's E-mail			

Background Information

Class Rank	Class Size	Covering a period from		_ to 	How many courses does your school offer: AP IB Honors
The rank is	\bigcirc weighted \bigcirc unweighted. How n	nany <mark>additional</mark> students share	this rank? _		If school policy limits the number a student may take in a given year, please list the maximum allowed:
How do you re	eport class rank? quartile	quintile	decile		AP IB Honors
This GPA is C Highest GPA ii	PA: on a sc) weighted () unweighted. The sch n class graduating class immediately atten	ool's passing mark is Graduatic	on Date	mm/dd/yyyy)	Is the applicant an IB Diploma candidate? O Yes O No Are classes taken on a block schedule? O Yes O No In comparison with other college preparatory students at your school, the applicant's course selection is: O most demanding O very demanding O demanding O average
-					O below average
How long have	e you known this student and in wh	at context?			
What are the f	first words that come to your mind t	o describe this student?			
Potingo 0.					
naunys Cor	mpared to other students in his or h	er class year, now do you rate t	nis student in	LETTIS OT:	

		Below		Good (coore	hoor (wei	Excellent	Outstanding	One of the top few I've encoun- tered
No basis		average	Average	average,	avera 🕞	(top 10%)	(top 5%)	(top 1%)
Acaden	nic achievement							
Extracu	rricular accomplishments							
Persona	al qualities and character							
OVERAL	L							

Evaluation Please provide comments that will help us differentiate this student from others. Feel free to attach an additional sheet or another reference you have prepared for this student. Alternatively, you may attach a reference written by another school official who can better describe the student. We especially welcome a broad-based assessment and encourage you to consider describing or addressing:

- The applicant's academic, extracurricular, and personal characteristics.
- Relevant context for the applicant's performance and involvement, such as particularities of family situation or responsibilities, after-school work obligations, sibling childcare, or other circumstances, either positive or negative.
- Observed problematic behaviors, perhaps separable from academic performance, that an admission committee should explore further.

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

To your knowledge, has the applicant ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime?
 Yes
 No
 School policy prevents me from responding.
 [Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered to be kept confidential by a court.]

If you answered "yes" to either or both questions, please attach a separate sheet of paper or use your written recommendation to give the approximate date of each incident and explain the circumstances.

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.)

 \odot Check here if you would prefer to discuss this applicant over the phone with each admission office.

I recommend this student: O No basis O With reservation O Fairly strongly O Strongly O Enthusiastically



2011-12 <mark>midyear report</mark>

For Spring 2012 or Fall 2012 Enrollment

TO THE APPLICANT

After completing the information in this section, give the please also give that school official stamped envelopes	2			knows you better.	. If applying vi	ia mail, ○ Female
Legal Name	ears on official documents)	First/Given	Middle	e (complete)	Jr., etc.	O Male
	· · · ·		imidule		JI., ELC.	
Birth Date	U	AID				
Address						
Number & Street	Apartment #	City/Town	State/Provi	ince Co	ountry	ZIP/Postal Code
School you now attend			_ CEEB/ACT Code			
 IMPORTANT PRIVACY NOTE: In accordance with the reflects your choice to waive or not waive your right or including this one. You chose the following: Yes, I do waive my right to access, and I understant No, I do not waive my right to access, and I may so on my behalf to the institution at which I enrolling 	of access to all recommend nd I will never see this forr someday choose to see this	dations and supp m or any other re s form or any oth	oorting documents. That ecommendations subminer recommendations o	t response applies	s to all subsequ my behalf.	uent reports,
T Please submit this form when midyear grades are availa in progress and transcript legend. (Please check transcri admission office. <i>Do not mail this form to The Comm</i>	ipt copies for readability.) E	or second trimes	ster). Attach applicant's			
Counselor's Name (Mr./Mrs./Ms./Dr.)						
Signature 🧠	Please print or type			De	to	
-				Da	te	1d/yyyy
Title		School				
School Address	City/Town	State/Pr	ovince C	Country	ZIP/Posta	ıl Code
School Website Address						
Counselor's Telephone ()		Counselor	s Fax ()			
Area/Country/City Code Nur	mber Exi	t.	Area/Country/City (Code	Number	
School CEEB/ACT Code	Counselor	r's E-mail				
Background Infernation If any of the information I the appropriate section below.	below has changed for this	s student since t	he School Report was s	submitted, please	enter the new	information in
	d from to (mm/yyyy) (mm/yyyy).	Cumulative G	PA: on a s	cale, covering a pe		to
The rank is O weighted O unweighted.		This GPA is C) weighted \bigcirc unweighte	d. The school's pa	ssing mark is	
How many additional students share this rank?		Highest GPA i	n class	Gradua	tion Date	
○ We do not rank. Instead, please indicate quartile q	uintile decile	J			(1	mm/dd/yyyy)
Have there been any changes to the senior year courses	listed on the original Scho	ool Report? 🔘	Yes <mark>O No</mark>			

Have there been any changes in the applicant's disciplinary status at your school since you submitted the original School Report? O Yes O No O School policy prevents me from responding

To your knowledge, have there been any changes to the applicant's criminal history since you submitted the original School Report? O Yes O No O School policy prevents me from responding

Do you wish to update your original evaluation of this applicant? O Yes O No

If you responded yes to any of the preceding questions, please attach an explanation.

 \odot Check here if you would prefer to discuss this applicant over the phone with each admission office.

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2011-12 <mark>FINAL REPORT</mark>

For Spring 2012 or Fall 2012 Enrollment

TO THE APPLICANT

After completing the information in this section, give this form to your school give that school official stamped envelopes addressed to all institutions requ		nool official who knows you b	etter. If applying via ma	ail, please also ○ Female
Legal Name				$$ \bigcirc Male
Last/Family/Sur (Enter name exactly as it appears on official docu	ments.) First/Given	Middle (comp	lete) Jr., etc.	
Birth Date	CAID			
mm/dd/yyyy				
Address Number & Street Apartment #	t City/Town	State/Province	Country	ZIP/Postal Code
	-			
School you now attend		CEEB/ACT Code		
 IMPORTANT PRIVACY NOTE: In accordance with the Family Educations reflects your choice to waive or not waive your right of access to all redincluding this one. You chose the following: Yes, I do waive my right to access, and I understand I will never see No, I do not waive my right to access, and I may someday choose to on my behalf to the institution at which I enrolling, if that institution 	commendations and supp e this form or any other re o see this form or any oth	orting documents. That respo commendations submitted b er recommendations or supp	onse applies to all subse y me or on my behalf.	quent reports,
TO THE SO Please submit this form when final grades are available (end of second se (Please check transcript copies for readability.) Be sure to sign below be <i>form to The Common Application offices.</i>	CHOOL COUR emester or third trimester) fore mailing directly to	. Attach applicant's official tra	anscript and transcript le ission office. <i>Do not m</i> a	egend. <i>ail this</i>
Counselor's Name (Mr./Mrs./Ms./Dr.)				
Please pri	nt or type			
Signature 🖄			Date	n/dd/vvvv
Title	School			
			<u> </u>	
School Address	State/Pro	vince Country	7IP/Pos	stal Code
	otato//re	unice country	211/100	
School Website Address Counselor's Telephone () Area/Country/City Code Number		Fax ()		
		, , , , , , , , , , , , , , , , , , ,	Number	
School CEEB/ACT Code Co	unselor's E-mail			
Background Information If any of the information below has change in the appropriate section below.	d for this student since th	ne Midyear Report was subm	itted, please enter the ne	ew information
Class Rank Class Size Covering a period from to (mm/yyyy) to (mm/yyyyy) to (mm/yyyyyy) to (mm/yyyyyy) to(mm/yyyyyy) to(mm/yyyyyy) to(mm/yyyyyy) to((mm/yyyy)	A: on a scale, co weighted \bigcirc unweighted. The	(mm/)	⁽ уууу) (<i>mm/yyyy</i>)
We do not rank. Instead, please indicate quartile quintile decile	Highest GPA in	class	Graduation Date	(mm/dd/yyyy)
				(11111/00/9999)
Have there been any changes to the senior year courses listed on the original sector of the sector o	inal School Report?	es O No		
Have there been any changes in the applicant's disciplinary status at your			<mark>?</mark>	
○ Yes ○ No ○ School policy prevents me from responding	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_	

To your knowledge, have there been any changes to the applicant's criminal history since you submitted the original School Report? Yes O No O School policy prevents me from responding

Do you wish to update your original evaluation of this applicant? O Yes O No

If you responded yes to any of the preceding questions, please attach an explanation.

○ Check here if you would prefer to discuss this applicant over the phone with each admission office.

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