United States House of Representatives
Page Program
SCHOOL REPORT

APPLICANT (After filling out the identifying information below, give this form to your school advisor/principal/or counselor)

NAME Last First Middle Jr. (etc.)

ADDRESS Street City state Zip Code

TELEPHONE (include area code) FAX

DATE OF BIRTH **SOC. SECURITY #**

ADVISOR'S/PRINCIPAL'S/COUNSELOR'S REPORT:

NAME OF PERSON PREPARING REPORT **POSITION**

SCHOOL NAME

SCHOOL ADDRESS

SCHOOL TELEPHONE **SCHOOL FAX**

SCHOOL CEEB/ACT/SAT CODE

Please complete the following regarding the applicant:

- Of this applicants graduating class, ___% plan to attend a four-year college. This applicant ranks __ in a class of ____ students.
- Attach an official 91h and 10" grade transcript. The applicant's Grade Point Average (GPA) cannot be determined without a complete record. Include a key to tbe transcript to aid computation. If available, attach a school prof.
- Please list coursework taken and sophomore years. Data and letter grades must be transferred from student's transcript.

FRESHMAN YEAR	SUBJECT	SEMESTER 1 GRADES	SEMESTER 2 GRADES
English			
Mathematics			
Science			
Social Studies			
Foreign Language			
SOPHOMORE YEAR	**SUBJECT**	**SEMESTER 1 GRADES**	**SEMESTER 2 GRADES**
English			
Mathematics			
Science			
Social Studies			
Foreign Language			