

HIGH SCHOOL ACADEMIC VERIFICATION FORM

Student's Name:
(Print your name legibly)
Instructions:
 Students should complete this form and ask their school counselor or other appropriate administrator to verify the information and sign the form. The student's high school transcript is not required at this time but may be requested at a later date. This form must be included in each applicant's hard copy packet as indicated on the Scholarship Application Checklist. Contact Dutch Hinck at 815.985-8582 or dutch@rrvtma.com with any questions.
Cumulative grade point average at time of application is based upon a scale
Cumulative grade point average is Weighted Non-weighted Class rank is out of % of class
Highest Composite ACT score: and/or Highest Composite SAT score:
List senior year courses [specify advanced placement (AP), honors (H), etc.]
Principal, Counselor, or Registrar Authorization:
Print Name High School

Signature _____ Date ____ School Seal <