



# TULANE UNIVERSITY SECONDARY SCHOOL REPORT

**INSTRUCTIONS:** Counselors, please verify that the **For the Student** section is complete (if it is not, ask the student to provide the missing information), fill out the **For the Counselor** section and forward this form, along with other supporting/attached documents, to either individual or multiple schools to which this student is applying. We recommend you save this document to your computer and fill it out using Adobe Reader or Adobe Acrobat.

## FOR THE STUDENT

Student Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Phone ( ) - \_\_\_\_\_ Email \_\_\_\_\_

I am applying for:  Early Action  Early Decision\*  Regular Decision

\*Early Decision applicants must enroll if admitted to Tulane University. In addition to all usual application documents, ED applicants must submit an Early Decision Agreement form signed by the student, a parent/guardian, and the high school's college counselor.

**Important Privacy Note:** By signing this form, I authorize all schools I have attended to release all requested records covered under the Federal Educational Rights and Privacy Act (FERPA) so that my application may be reviewed by the institution(s) to which I am applying. I further authorize the admission officers reviewing my application, including seasonal staff employed for the sole purpose of evaluating applications, to contact officials at my current and former schools should they have questions about the school forms submitted on my behalf.

By signing below, I agree to the preceding statement.

I waive my right to review or access letters and statements of recommendation on my behalf.  YES  NO

Required Signature \_\_\_\_\_ Date \_\_\_\_\_

## FOR THE COUNSELOR

High School \_\_\_\_\_ High School CEEB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Counselor's Name \_\_\_\_\_ Title \_\_\_\_\_

Email \_\_\_\_\_

Does your school offer AP courses?  Yes  No

If yes, is there a limit as to how many AP courses a student may take?  Yes  No

Please list the limit amount, if any: \_\_\_\_\_

Class rank \_\_\_\_\_ in a class of \_\_\_\_\_, covering a period from \_\_\_\_\_ to \_\_\_\_\_. H.S. graduation date \_\_\_\_\_  
(mm/yyyy) (mm/yyyy)

This rank is  weighted  unweighted. How many students share this rank? \_\_\_\_\_

If a precise rank is not available, please indicate rank to the nearest tenth from the top: \_\_\_\_\_

Please list the point range your school assigns the following letter grades:

Grade **A** \_\_\_\_\_ Grade **B** \_\_\_\_\_ Grade **C** \_\_\_\_\_ Grade **D** \_\_\_\_\_ Grade **F** \_\_\_\_\_

Cumulative GPA (in the form of a letter grade) \_\_\_\_\_ on a \_\_\_\_\_ scale, covering a period from \_\_\_\_\_ to \_\_\_\_\_.  
(mm/yyyy) (mm/yyyy)

This GPA is  weighted  unweighted. What is currently the highest GPA in your student's class? \_\_\_\_\_

Percentage of graduating class attending: \_\_\_\_\_ four-year \_\_\_\_\_ two-year institutions.

This student's course selection is:  Most Demanding  Very Demanding  Demanding  Average  Below Average

## COUNSELOR SECTION (CONTINUED)

Compared with other college-bound students in his or her secondary school class, how do you rate this student in terms of the following?

No Basis	Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the Top Few Encountered in My Career
<input type="radio"/> Academic Achievements	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Extracurricular Accomplishments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Personal Qualities and Character	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Overall Recommendation to Tulane	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

We'd like to know why you feel your student would be a great fit for Tulane University. Please expand on your student's abilities, accomplishments and character in the space below – attach additional pages if needed.

OR simply attach a letter of recommendation you have already written, if you believe it adequately addresses this request.

**Please answer the following questions.**

Has the applicant been found responsible for a disciplinary violation at your school from 9th grade forward, whether academic or behavioral, which resulted in the applicant's probation, suspension, removal, dismissal or expulsion from your school?  Yes  No

To your knowledge, has the applicant ever been convicted of a misdemeanor, felony or other crime?  Yes  No

If you answered yes to either or both questions, please attach a separate sheet of paper with the approximate date of each incident and explain the circumstances.

**I recommend this student:**  Very Highly  Highly  Moderately  With Reservations

Signature \_\_\_\_\_ Date \_\_\_\_\_