



# 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 Collin Ruthe at 815-708-2227 or [collin@rrvtma.com](mailto:collin@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 \_\_\_\_\_ students which places student in the top \_\_\_\_\_ % 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 < >