



CLIENT AND FAMILY INFORMATION

Please fill out the information with as much detail as possible.

■ STUDENT INFORMATION:

Full Name: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Date of Birth: _____ Email Address: _____

■ FAMILY INFORMATION:

PARENT 1

Full Name: _____

Street: *(if different than student)* _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Date of Birth: _____ Email Address: _____

Occupation: _____

College(s) Attended: _____

Degree(s): _____

PARENT 2

Full Name: _____

Street: *(if different than student)* _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Date of Birth: _____ Email Address: _____

Occupation: _____

College(s) Attended: _____

Degree(s): _____

CLIENT AND FAMILY INFORMATION *continued*

SIBLINGS

■ Please list names of siblings including their age, school or college, and occupation:

- 1) Full Name: _____ Age: _____
School/College: _____ Occupation: _____
- 2) Full Name: _____ Age: _____
School/College: _____ Occupation: _____
- 3) Full Name: _____ Age: _____
School/College: _____ Occupation: _____
- 4) Full Name: _____ Age: _____
School/College: _____ Occupation: _____

SECONDARY EDUCATION

- School 1: _____ City: _____ State: _____
Dates of Attendance: _____
- School 2: _____ City: _____ State: _____
Dates of Attendance: _____
- School 3: _____ City: _____ State: _____
Dates of Attendance: _____

ACADEMIC INFORMATION

Approximate High School GPA Rank (if known): _____

Number of Students in Graduating Class: _____ Month/Year of Graduation: _____

Please list High School classes (and anticipated classes) and grades*

- Freshman Year: _____

- Sophomore Year: _____

- Junior Year: _____

- Senior Year: _____

*Alternatively, please send High School transcript, additional grade reports, and available narrative comments from teachers (Independent Schools)

- Please list any academic, athletic, service, or arts awards received:

- Please list teachers (and others) you think would write a strong letter of recommendation (include their email and phone number):

TESTING

- PSAT Date Taken: _____

Critical Reading Score: _____

Math Score: _____ Writing Score: _____

- SAT First Date Taken: _____

Critical Reading Score: _____ Writing Score: _____

Math Score: _____ Special Subject(s): _____

- SAT Second Date Taken: _____

Critical Reading Score: _____ Writing Score: _____

Math Score: _____ Special Subject(s): _____

- ACT First Date Taken: _____

English Score: _____ Science Score: _____

Math Score: _____ Composite Score: _____

Reading Score: _____ Writing Score: _____

- ACT Second Date Taken: _____

English Score: _____ Science Score: _____

Math Score: _____ Composite Score: _____

Reading Score: _____ Writing Score: _____

ACCESS

- Naviance Access User Name: _____ Password: _____

- College Board User Name: _____ Password: _____

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ACTIVITIES

- Please list all school year activities in which you have been involved including sports, clubs, paid work, community service, visual and performing arts:

- Please list all summer activities including camp, work, travel, sports, and plans for next summer:

COLLEGES

- Please list all colleges you have visited or you find interesting:

- Please share your thoughts on size or location of the college you think you would like:

OTHER INFORMATION

- Please list any other information you would like us to have:
