High School Seniors GPA and SAT/ACT Scores Verification Form

I,	, give my permission for the High Schoo				
Guidance Office to release m					
Club Scholarship Committee	e and I request	a copy of my tr	anscripts be provi	ded to the	
Vicenza Community Club (V	CC) Scholarshij	o Committee fo	r the purpose of a	pplying	
for scholarship consideration	n.				
Signature of Student A		Today's D	—— ate		
This section	n to be filled out l	by the high schoo	ol counselor		
G. I W					
Student Name:					
Cumulative H.S. Grade Point	: Average:				
Academic Testing Informa	ntion				
SAT Test Date:	e: AC		Test Date:		
A. SAT Score:	_ Reading:	Math:	Writing:		
B. ACT Composite Score:_					
English:Math:	Reading:	Science:			
Transcript Attached: Yes_	No				
Signature of Counselor		Date			
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SCHOOL EMBOSSED SEAL (please lightly go over the seal with a pencil before scanning)