



TO THE STUDENT: Please submit the items if the school you are applying to requires them. Go to www.gatewaytoprepschools.com/member-schools for information on which forms are required by the school. Submitting these forms through the online Gateway system (www.gatewaytoprepschools.com) is preferred by receiving schools.

You should request each item from the official or officials at your school who handle such requests. In some cases, one school official may submit

all of the items; in other cases, different school officials may submit each item.

Send this request to the school official responsible for grade reports at your current school. The school will be responsible for sending your grades from the past two years:

- If you are new to your school this year, send this request to the school official responsible for grade reports at your previous school.

Student's Name _____
Last First Middle Current Grade

Student's Address _____

City/Town State/Province Country Zip/Postal Code

Current School _____ Previous School Attended _____

TO THE SCHOOL OFFICIAL: Please submit Previous Grades for the past two years. It is our preference that Previous Grades be submitted separately from Current Academic Year Grades. However, if your school grade report includes current grades and previous grades, please also submit a copy to the Current Academic Year Grades to complete both requirements on the student's application requirement checklist.

Having trouble? Visit the Member Schools page at www.gatewaytoprepschools.com/member-schools for contact information.

School serves grades: _____ to _____ Number of students in entire school: _____

In what month does your school year begin? _____ end? _____

Please explain your grading scale _____

Please describe your academic grade distribution (e.g., the percentage of students in the applicant's grade/year who earn A's, the percentage who earn B's, and the percentage who earn C's, etc.)

Does your school rank? ☐ Yes ☐ No Is your rank: ☐ Approximate ☐ Exact How many students are in the entire grade? _____

Does your school use a block scheduling system? ☐ Yes ☐ No

This candidate ranks _____ out of _____ . _____ other students share this rank.

Are students placed in sections according to ability? ☐ Yes ☐ No If yes, please tell us in which level the applicant is placed for each subject.

Last Name, First Name, Middle Name
Applying for

Date of Birth
Gender

Name of Student _____

If the student's attendance record is not listed on the transcript, please indicate the number of days they have been absent or tardy each year while at your school.

If the student is not, or has not been, in good academic standing, please explain.

May we contact you for further information about this candidate? ☐ Yes ☐ No

Signature _____ Date _____

Printed Name _____

Title _____

School Email Address _____

School Address _____

Telephone _____

Last Name, First Name, Middle Name
Applying for

Date of Birth
Gender