

FINAL TRANSCRIPT REPORT

OFFICE OF UNDERGRADUATE ADMISSION

Perlstein Hall, Room 101
10 West 33rd Street
Chicago, IL 60616

APPLICANT

Complete the section below and give this form to your guidance counselor or registrar.

Full Name _____
FIRST (GIVEN) MIDDLE LAST

Mailing Address _____
CITY STATE ZIP CODE COUNTRY

I have submitted or will submit **Advanced Placement exam scores.** ___ Yes ___ No

International Baccalaureate exam scores. ___ Yes ___ No

Send above scores to Office of Educational Services 101 Main Bldg. 3300 South Federal Street Chicago, IL 60616

I have submitted or will submit **transcripts for any college credit earned.** ___ Yes ___ No

Send transcripts to Office of Undergraduate Admission. Address listed above.

SECONDARY SCHOOL COUNSELOR/REGISTRAR

Please answer the questions below and use this Final Transcript Report to report student's grades for the last term of the current school year. Please return by **August 15th** to the Office of Undergraduate Admission. Before the student matriculates to Illinois Institute of Technology, this form will be removed from the student's file and destroyed.

Official School Name _____ CEEB Code _____

Mailing Address _____
CITY STATE ZIP CODE COUNTRY

1. The student graduated on (month/day/year) _____ and ranked _____ of _____.
2. Student's final grade point average was _____ on a maximum grading scale of _____.
Please check one: ___ Weighted or ___ Unweighted
3. Please attach the student's **final transcript**. Please remind student to have AP scores, IB scores or college transcripts sent to the above addresses.
4. If you have noticed anything about the student that will cause you concern about his or her transition to college, or if there are any significant additions or changes to his or her academic, extracurricular or character record, please use the back of this page for your remarks.
5. At this point, I believe the student can be recommended in terms of both academic ability and character.
Please check one: ___ Strongly Recommended or ___ Not Recommended

Name _____ Position _____

Length of time acquainted with student _____

Telephone _____ E-mail _____

Signature _____ Date _____

FOR OFFICE USE ONLY

S _____ AD _____ BD _____