

Service Academy Academic Recommendation Form

Principal or Guidance Counselor

This form must be completed by either a high school principal or guidance counselor. **Please note that the completion of the recommendation form is a requirement for consideration for a nomination. Type or print and return your completed form to the applicant in a sealed envelope with your signature across the seal.**

The following information must be included as it is an integral part of the service academy candidate's application. If your school does not rank students, please provide an accurate estimate of the applicant's class standing and an appropriate rank.

PLEASE TYPE OR PRINT THE REQUIRED INFORMATION

Name of Applicant: _____ **Year in School:** _____
(Last Name) (First Name) (Middle Name) (Suffix)

Class Rank (mark one): Does Not Rank _____ (rank #) of _____ (class size)
 Top 5% Top 10% Top 15% Top 20% Top 25% Below 25%

Weighted _____ or Un-weighted _____ GPA (mark one, and mark one below)
 4.5 & Higher 4.4-3.7 3.6-3.4 3.3-3.2 3.1-3.0 Below 3.0

SAT Composite _____	SAT Math _____	SAT Reading _____
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ACT Composite _____	ACT English _____	ACT Math _____	ACT Reading _____	ACT Science _____
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Additional Academic Criteria (mark all that apply): Honors AP Classes IB Program AICE

Please use the following scale to rate the applicant's abilities:

	Excellent	Good	Fair	Poor
Leadership characteristics				
Personality traits				
Ability to get along with and work well with others				
Ability to work under pressure				
Ability to take criticism				
Attendance, punctuality, and dependability				
Overall assessment of candidate				

General Comments:

Signature: _____

Date: _____

Title: _____

School: _____