## 2024 U.S. PRESIDENTIAL SCHOLARS PROGRAM SECONDARY SCHOOL REPORT

| Legal name of student Last   | First                 | MI                    |  |  |
|--|-----------------------|-----------------------|--|--|
| To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, a school must obtain signed authorization before it can release student information for use in this program. |                       |                       |  |  |
| If you will be under 18 by February 22, 2024, your parent/guardian must sign below.  |                       |                       |  |  |
| Permission is hereby given to school officials to release the secondary school record and other requested information for the student named above for consideration in this award program.           |                       |                       |  |  |
| Student's signature  |                       | Date                  |  |  |
| Parent's or guardian's signature   |                       | Date                  |  |  |
| If you have attended your current school for less than two years, you may copy this school to also complete a copy for you.  | form and request some | cone from your former |  |  |

 School Name
 ST
 ZIP Code
 Phone

## **Important Instructions for Recommender and Principal:**

- 1. The student named above is a candidate for the honor of Presidential Scholar. Please provide thorough and complete responses to the questions on this form. *Incomplete or limited answers will place your student at a disadvantage*. If you complete this form by hand, *please write legibly* using black or blue ink.
- 2. Do not submit a letter of recommendation as a replacement for this form. All extraneous material, including letters of recommendation, are removed from candidates' files and will not be included with the application for review.

If you submit a letter of recommendation, your student's application will be reviewed as it stands *without the letter of recommendation, placing your student at a disadvantage.* If you wish, you may cut/copy and paste your answers to the questions on this form from a letter of recommendation.

- 3. In order to process this student's application, we must receive
  - This completed form;
  - A 7-semester secondary school transcript, including grades 9-12;
  - Any AP test scores (copies are accepted; need not be official); and
  - A school profile, if available.
- 4. Both the recommender and the principal must sign this form on page 4. Seal the signed form, transcript, any test scores, and school profile in an envelope. A school official's signature must appear across the envelope seal for it to be accepted by the Commission. *Return the signed envelope to the student for submission with his or her application materials, in time to meet the RECEIPT deadline noted below.* If you need assistance with this requirement, call 507.931.8345, 7:00 am 5:00 pm Central Time.

All application materials, including this form and transcripts, must be received by 5:00 P.M. Central Time, February 22, 2024. Any application materials not received by that deadline will render the student's application ineligible for review, regardless of who sends them.

| * | Items A-F ar | e required | and must | be complet | ed by a scl | hool official | (Counselor, | <b>Principal</b> | , etc.): |
|---|--------------|------------|----------|------------|-------------|---------------|-------------|------------------|----------|
|   |              |            |          |            |             |               | (           | <b>r</b>         | ,,       |

| A. | Name of principal         Last         MI  |  |  |  |
|----|--|--|--|--|
| B. | Are you confident that the student will receive a school diploma during the current academic year?         Yes       No         If no, please explain. |  |  |  |
| C. | Expected date of graduation Month / Year   |  |  |  |
| D. | Student's class rank        Number of students in class        School does not rank students.  |  |  |  |
| E. | Student's grade point average on a point scale, based on semesters.  |  |  |  |
| F. | Number of AP courses your school offers:          AP exams taken and results:  |  |  |  |
| G. | Who is evaluating the student on the following pages?  |  |  |  |
|    | Name   Relationship to student (e.g., Teacher/Counselor)   |  |  |  |
|    | Length of relationship       If teacher, please state subject(s)   |  |  |  |

In items H-O, please be concise. Use examples to support your comments. Limit your response to the space provided.

**H.** What economic or social conditions characterize your community and most of the parents of the children in your school? (For example, is your community a university town, a mill town, a farming area?)

I. Considering this student's interests, work habits, and life goals, what is your assessment of the chances that the student will be motivated to take advantage of the opportunities available in college? Please give reasons for your assessment.

**J.** Does your school have a service requirement? Yes No If yes, number of hours and type of service required:

This student has exceeded met not met the service requirement.

What special features are part of your school's curriculum (e.g. AP and honors courses, college study, independent study)? Has the student taken advantage of the most challenging opportunities your school has to offer?

K. Has this student given any strong evidence of leadership ability? Yes No Please explain the criteria on which you base your judgment and how the student meets those criteria. Include a discussion of the student's principal strength.

L. Describe how this student demonstrates strong character (e.g. integrity, independence, loyalty, patriotism, self-discipline, employment responsibilities, willingness to work hard, kindness, commitment to high ideals, and caring for others).

M. Has the student shown exceptional talent or originality in any specific field such as art, music, science, literature, or mathematics? Yes No Please cite examples.

N. Is there anything else about this student you feel is important for the Commission to know that is not likely to appear in the student's application or transcript – additional qualities, anecdotes, circumstances, or background that would give the Commission insight into this individual?

**O.** What areas, academic or otherwise, have most challenged this student?

| Title | _ Recommender's Signature | Date |  |
|-------|---------------------------|------|--|
|       |                           |      |  |
| Title | Principal's Signature     | Date |  |

After completing this form, attach the candidate's transcript, and a copy of your school profile, and seal them all in an envelope. Sign your name across the seal and **return the envelope to the student** for submission with his/her application materials per the deadline noted on Page 1 of this form. If you need assistance with this requirement, please call 507.931.8345, 7:00 a.m. - 5:00 p.m. Central Time, Monday - Friday.