



## Community Service Scholarship Program

### Academic Information (to be completed and signed by high school guidance counselor)

I certify that \_\_\_\_\_ is ranked \_\_\_\_\_ out of a class of \_\_\_\_\_, and has a GPA of \_\_\_\_\_ at \_\_\_\_\_ High School.

ACT Scores: \_\_\_\_\_  
English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_ Cumulative \_\_\_\_\_

Please attach a copy of the student's most recent transcript with this certification.

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Signature

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Printed Name

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Title

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Date