



Marietta College

GUIDANCE COUNSELOR REPORT (REQUIRED)

APPLICANT

Please complete the top four lines of the report and give it to your guidance counselor for completion. We have enclosed an envelope on which we suggest you place a stamp and then give to your counselor for the return of this information.

Name _____
last first middle initial

Permanent Address _____
number and street
_____ *town/city county state zip*

Phone (_____) _____
area code

Social Security # _____ / _____ / _____

GUIDANCE COUNSELOR

Please complete this report and return it to us at the address at bottom left. You should enclose a transcript which includes courses in progress. Notation of honors, accelerated, or Advanced Placement courses is requested. Test results, such as scores on SAT I/II and ACT tests should also be included. If possible, we would appreciate your sending us an explanation of the grading system your school uses and a school profile. **Confidentiality: Your comments will be held in strictest confidence during the selection process and they will not become part of the applicant's file if he/she matriculates at Marietta College.**

Name _____ Position _____
please type or print

Secondary School _____

School Address _____

Office Telephone _____ / _____ - _____ School CEEB/ACT Code _____

The candidate's grade point average (G.P.A.) is _____ on a 4.0 scale.

This candidate ranks _____ from the top in a class numbering _____.

If precise rank is not available, please indicate rank to the nearest tenth from the top. _____

This rank is (check one) weighted not weighted. If your school does not rank, please check.

Of this candidates graduating class, _____ % plan to attend a four-year college.

Is the curriculum pursued by this candidate (check one): average demanding
 unusually demanding

In what context(s) have you known the applicant? _____

(over please)

OFFICE OF ADMISSION
MARIETTA, OHIO 45750-4005
740-376-4600
800-331-7896
FAX 740-376-8888

PROFICIENCY EXAMINATIONS

- This student has passed the proficiency tests required by our school district/county/state/etc.
- This student did not pass the following proficiency tests required by our state.
- Our state does not require proficiency examinations.

EVALUATION

Please write a candid evaluation of the applicant. We welcome all information that will help us gauge the academic potential of this candidate and differentiate him/her from others.

RATINGS

Please evaluate this candidate in comparison to other college-bound students you have encountered using the following scale:

1 — Truly Outstanding 2 — Excellent (top 10%) 3 — Good (above average) 4 — Average 5 — Below Average

Genuine interest in learning	_____	Self-confidence	_____
Academic potential	_____	Emotional maturity	_____
Commitment to a rigorous college preparatory curriculum	_____	Seriousness about the entire college selection process	_____
Leadership	_____	Respect accorded by the faculty	_____

SIGNATURE _____ **DATE** _____

I recommend this student

- enthusiastically strongly fairly strongly with reservation

You may call me for additional information _____
phone number

REMINDER: PLEASE RETURN AS SOON AS POSSIBLE, BUT NOT LATER THAN **APRIL 15** FOR GENERAL ADMISSION OR **MARCH 1** IF THE APPLICANT WISHES TO BE CONSIDERED FOR ACADEMIC SCHOLARSHIPS.