



High School Counselor Form

IPFW is an Equal Opportunity/Equal Access University.

Name: _____ Birthdate: ____/____/____

This section is for current high school students only. (To be completed by the high school guidance counselor)

Please complete the information below and attach any other information that might help IPFW make an informed admission decision. Attach an official copy of the applicant's high school transcript, including courses in progress and SAT or ACT scores, and mail to:

IPFW Admissions
2101 East Coliseum Boulevard
Fort Wayne, IN 46805-1499
Fax 260-481-5450

The applicant ranks _____ in a graduating class of _____ students (rank calculated at the end of the sixth seventh eighth semester).

Applicant's cumulative grade-point average is _____ based on a 4.0 scale 12.0 scale other _____

Indiana residents only.
Please do not leave blank.



Applicant: Is pursuing CORE 40 Diploma yes no
 Is pursuing Academic Honors Diploma yes no
 Passed End of Course Assessments yes no
 Is a Twenty-first Century Scholar yes no

Senior-year courses in progress (if school is on a block schedule, please list courses in all blocks for senior year):

Seventh Semester (Block 1/Block 2)

Eighth Semester (Block 3/Block 4)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Comments:

 Counselor's Signature Counselor's Name (Please Print) Date

 High School CEEB Code Number (_____) Guidance office phone number

 City State Guidance Counselor E-mail Address

Accreditation: High school is (please check one) accredited by a state educational agency. not accredited by a state educational agency.