**APPLICANT**

After completing all the relevant questions below, give this form to your current Guidance Counselor.

*Please print or type*

Legal name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male

*Last/Family/Sur First*

*(Enter name* ***exactly*** *as it appears on official documents)* Female

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

*Number & Street Apartment # City/Town Zip Code*

Current School: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_*

*Student ID#*

**IMPORTANT PRIVACY NOTICE:** Under the terms of the Family Educational Rights and Privacy Act (FERPA), after your acceptance you will have access to this form and all other recommendations and supporting documents submitted by you and on your behalf, unless you waive your right to access:

 Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf.

 No, I do *not* waive my right to access; and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate.

**GUIDANCE COUNSELOR REPORT**

The Academy for College Excellence (ACE) is an early college high school program for the independently motivated student who has the desire to exceed the expectations of a high school student and embrace college level work. ACE is a collaborative initiative of the Northeastern University- College of Professional Studies and the Massachusetts Association for Vocational Administrators. To learn more about the program, please visit [www.academyforcollegeexcellencecvte.org](http://www.academyforcollegeexcellencecvte.org).

Attach applicant’s official transcript, including courses in progress.

Counselor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Full Name Title*

Counselor’s Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Counselor’s fax number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Counselor’s e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*CEEB Code*

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Date*

**STUDENT BACKGROUND INFORMATION**

Class Rank: Class Size: GPA: Highest Class GPA:

*Current School Year Attendance*

Total Days Absent: Day’s Present: Tardy: Dismissals:

Please explain, if necessary:

How long have you known this student and in what context?

What are the first words that come to your mind to describe this student?

**Ratings:** Compared to other students in his or her class year, how do you rate this student in terms of:

Below Average Average Very Good Excellent Outstanding

(well above average) (top 10%) (top 5%)

Academic achievement

Extracurricular Accomplishments

Maturity

Motivation

Reaction to setbacks

Initiative, independence

Overall

**I recommend this student: No basis With Reservation Fairly Strongly Strongly Enthusiastically**