STUDENT PROFILE FORM

In what areas would you like coaching?

____Understanding the college admissions process
____Developing a good college list
____Deciding on classes for high school four-year academic planning
____Summer programs _____ Career Interest Inventory
____Testing _____ Other_____
____Getting on top of learning disabilities and how to deal with them in the college application process
____Questions related to LD/ADHD

STUDENT'S NAME _____ **GRADE IN SCHOOL**_____

Birth date: _____ Age: _____

HIGH SCHOOL_____**YEAR OF GRADUATIION**_____

STUDENT EMAIL_____ **PARENT EMAIL**_____

HOME ADDRESS _____ **HOME TEL** _____**CEL**_____

CITY _____ **STATE**_____**ZIP** _____

HOME FAX _____**WHO REFERRED YOU?** _____

SCHOOL/COLLEGE NOW ATTENDING _____**TEL**_____

FATHER: _____ **College:** _____**Work Tel:**_____

MOTHER: _____ **College:** _____ **Work Tel:** _____

PARENTS' OCCUPATIONS:
_____

NAME & AGES OF BROTHERS AND SISTERS

Name	AGE	School Attending	Grade
_____	_____	_____	_____
_____	_____	_____	_____

CUMALATIVE GPA: _____

LIKELY MAJOR in COLLEGE: _____

TEST INFORMATION:

PSAT Scores:
Verbal/Critical Reading: ____
Math: ____
Writing _____

Subject (SAT II) Test Scores:
_____ _____ _____ _____

SAT I Scores:
Critical Reading: ____
Math: ____
Writing: ____
Essay: _____

ACT Scores:
English _____
Math _____
Reading _____
Science _____
Combined _____

Please fax or send electronically the student info form along with a transcript to: joanjacobs@roadrunner.com