R·I·T

Secondary School Transcript Request

Please fill in the Applicant Section below and give this form to your secondary school counselor. Be sure to give your counselor time to fill out this form before the due date. After completing the form, your counselor should send it to:

Rochester Institute of Technology
Undergraduate Admissions Office
60 Lomb Memorial Drive
Rochester, NY 14623-5604

Due Dates (Postmark)

Early Decision I	November 1
Early Decision II	January 1
Regular Decision Plan	January 15

Applications completed after January 15 will be reviewed on a rolling basis.

Applicant Section:

Name _____
Applicant's full legal name—last name first

Address _____

Social Security Number (optional) _____ Date of Birth _____

School Name _____

Address _____
Number and Street City/Town State/Province Zip/Postal Code

Are you applying under the Early Decision Plan? ❑ **Yes** ❑ **No**

Counselor Section: (Please note that lack of rank and GPA will make this application more difficult to process)

CEEB CODE _____ Entered _____ ❑ Withdrew _____ ❑ Will graduate _____
month & year month & year month & year

Class Rank

The candidate ranks _____ in a class numbering _____ during the period from _____ to _____.

The rank is ❑ weighted ❑ unweighted. If there are other students tied at that rank, how many share the same ranking? _____

If a precise rank is not available, indicate the rank to the nearest tenth from the top. _____ ❑ We do not rank.

Of last year's graduating class, percentage of students attending: four-year _____ two-year _____ college or university.

Grade Point Average

The applicant's cumulative GPA is _____ on a _____ scale, covering a period from _____ to _____.

This GPA is ❑ weighted ❑ unweighted. The applicant's highest possible GPA is _____.

Your school's minimum passing grade is ❑ 60 ❑ 65 ❑ 70 ❑ other (specify) _____.

In comparison to other college preparatory students at your school, this applicant's course selection is:

❑ most demanding ❑ very demanding ❑ demanding ❑ average ❑ less demanding

Standardized Test Scores

ACT Tests

Date taken/ to be taken	English	Math	Reading	Science	Composite	Writing

Date taken/ to be taken	English	Math	Reading	Science	Composite	Writing

SAT Reasoning Tests

Date taken/ to be taken	Critical Reading	Math	Writing

Date taken/ to be taken	Critical Reading	Math	Writing

Date taken/ to be taken	Critical Reading	Math	Writing

SAT Subject Tests

Date taken/ to be taken	Subject	Score

Date taken/ to be taken	Subject	Score

Date taken/ to be taken	Subject	Score

TOEFL/IELTS (international applicants)

Date taken/ to be taken	Test	Score

Date taken/ to be taken	Test	Score

Date taken/ to be taken	Test	Score

Counselor Recommendation

Please rank applicant in the following categories:

	Below Average	Average	Above Average	Excellent (top 10%)	Outstanding (top 5%)
Academic promise	❑	❑	❑	❑	❑
Character and personal promise	❑	❑	❑	❑	❑
Potential for success at RIT	❑	❑	❑	❑	❑

Mainstream Program

If applicant is deaf or hard of hearing, please indicate if the student has been mainstreamed and any access/support services received:

Years mainstreamed _____ ❑ Interpreter ❑ Tutor ❑ Notetaker ❑ Speech-to-text Services
❑ Resource Room ❑ Self-contained Classroom

Summary and Recommendation

Please write a summary appraisal of the applicant. We are particularly interested in observations about character, motivation, ability and any special talent or quality. Please describe any special factors that should be considered in interpreting the applicant's record, such as unusual home conditions or illness. Please don't hesitate to attach a copy of a letter you have already written on behalf of this applicant.

Counselor Signature:_____ Date: _____

Name (please print): _____ Title: _____

E-mail Address at School:_____ Telephone Number at School: _____

Early Decision

If the student is applying under RIT's Early Decision Plan (indicated on front page), please read the following and sign below:

I have discussed Early Decision consideration with this applicant. The applicant understands Early Decision is a first-choice plan.

_____ _____
Signature Date

Transcript

An official copy of the applicant's secondary school record should be included with this form.

Profile

Please include a copy of your school's profile (information about curriculum, percentage of graduates going on to college, standardized-test scores and the like).