

___ EARLY DECISION
___ EARLY ACTION
___ EARLY DECISION II
___ REGULAR DECISION

Legal name: _____

 First Middle Last

Birth date: _____

 Month Day Year

Address: _____

 Number and Street City State ZIP

School: _____

 Official Name CEEB School Code

Number and Street City State ZIP

I do not waive my right to examine this document. _____

LOWEST

Has the student been placed on probation, suspended (in or out of school) or dismissed from school since the original Secondary School Report was submitted? ☐ Yes ☐ No ☐ If YES, please explain in full on an additional attached sheet.

Have there been any substantial additions or changes in this candidate's academic, extracurricular or character records since your previous report? Yes ☐ No ☐ If YES, or if your original recommendation for this student has changed since the Secondary School Report form was submitted, please comment below or on an attached sheet.

Wake Forest is committed to administer all educational and employment activities without discrimination because of race, color, religion, national origin, age, handicap, or gender, except where exempt.

Name of Counselor: _____
Last
First
Middle

Position: _____ School: _____

School address: _____

Office telephone: _____ Ext: _____ E-mail address: _____
Area Code / Number

Signature: _____ Date: _____