



Student Information Form

Student Name: _____

Student Email: _____

Student Cell Phone # (optional): _____

Have you attended any other high schools besides SJCP? YES No

If yes, please list high schools: _____

Did your parents attend college? YES No

If so, where?

College/University	Location	Degree

Do you have siblings that are attending or have graduated college?

YES No If so, where do/did they go?

College/University	Location	Degree	Year

Name three of your closest friends at SJCP; and for each one, give a different one-word adjective that THEY would use to describe you?

First Name, Last Name	Adjective

Is your academic record an accurate measure of your ability? Why or why not?

What *academic* course have you enjoyed most at SJCP:
_____ What do you think made it enjoyable and why? (i.e. teacher, content of course, classroom atmosphere, your own achievement): _____

If you were to write your own recommendation what would you include? Please give detailed reasons why.

*******THIS FORM NEEDS TO BE ATTACHED TO YOUR RESUME AND RETURNED TO GUIDANCE BY June 1, 2020*******