

HIGH SCHOOL TRANSCRIPT FORM

SECTION A *Applicant is to complete this section (in English) and forward to high school.*

Applicant Name _____ Phone Number _____ Email _____

Employee (Parent Name) _____ Dealership Name _____ City _____ Email _____

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student if he/she is 18 years of age or older, or the consent of his/her parent if the student is under the age of 18. Therefore, to complete The Brunswick Dealer Sons & Daughters Scholarship Program Application, this consent form must be signed prior to the high school official completing SECTION B of this form. "I, hereby, consent to allow my (son's/daughter's) school to release all pertinent scholastic and educational information regarding me (my son/ daughter) requested below and contained herein to properly complete The Brunswick Dealer Sons & Daughters Scholarship Program Application."

Applicant Signature _____ Date _____

Parent / Guardian Signature (if applicant is under 18 years of age) _____ Date _____

----- **APPLICANT: DO NOT WRITE BELOW THIS LINE** -----

SECTION B

UNITED STATES - *School Official: please complete the following and attach a current official high school transcript, and grading scale if other than a 4.0 scale is used, in a sealed envelope by 3/16/2020.*

Class rank _____ out of _____ **Cumulative GPA** _____ / 4.0 scale (If scale is not 4.0, please include grade comparison explanation)

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

Date ACT Taken _____ / _____ (Month/Year)

SAT Scores: Evidence-Based Reading and Writing: _____ Math: _____ Total: _____

Date SAT Taken _____ / _____ (Month/Year)

CANADA - *School Official: please complete the following and attach a current official high school transcript and grading scale in a sealed envelope by 3/16/2020.*

Class rank _____ out of _____ **Grade Average** _____

School Official:

Print Name _____ Signature _____ Date _____ Title _____

School Name _____ Email _____ Phone Number _____

School Address _____ City _____ State/Province _____ Zip/Postal Code _____ Country _____

Completed form, along with an official school transcript, should be submitted by March 16, 2020 to:

The Brunswick Dealer Sons & Daughters Scholarship Program, PO Box 648, Naperville, IL 60566

Overnight deliveries (FedEx, DHL, etc) should use the following shipping address:

The Brunswick Dealer Sons & Daughters Scholarship Program, 552 S. Washington Street, Suite 202, Naperville, IL 60540