

Bard College at Simon's Rock | The Early College

Office of Admission
84 Alford Road
Great Barrington, MA 01230-1978

APPLICATION FOR ADMISSION
Phone: 800-235-7186 Fax: 413-541-0081
E-mail: admit@simons-rock.edu
Applying to enter in: _____

School Report

About the Applicant:

Legal Name	Preferred First Name
<i>Last/Family/Sur</i>	<i>First/Given</i>
<i>Middle</i>	

PRIVACY NOTICE: By signing the application, this student authorized their school to release all requested records covered under the Family Educational Rights and Privacy Act (FERPA) so that the application may be reviewed for admission by Bard College at Simon's Rock. They further authorized the admission officers reviewing the application to contact school officials should they have questions about this form. Under the provision of the FERPA, they will have the right, when they enroll at Simon's Rock, to review their educational records, unless they waive their right to access below. Conversely, admission records are not accessible to applicants, those students who are denied admission, or those students who decline an offer of admission.

☐ This student waived their right to access this form.

To the Secondary School Guidance Counselor:

Attach applicant's official transcript, including courses in progress, a school profile, grading scale, and transcript legend. (Please check transcript copies for readability.) Please provide all available information for this applicant and sign below.

Counselor's Name	Mr./Mrs./Ms./Dr.	Counselor's Title
Counselor's Phone ()	Counselor's Email
<i>Area/City Code</i>	<i>Number</i>	<i>Extension</i>

Signature	Date
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About Your School:

School Name	CEEB/ACT Code			
School Address				
<i>Number and Street</i>				
<i>City/Town</i>	<i>State/Province</i>	<i>Zip/Postal Code</i>	<i>Country</i>	<i>County/Parish</i>

School Type (circle) Public Independent/Non-Religious Religious Affiliation (specify) _____ Home School (specify association) _____

Grade Levels served (e.g., 9-12) _____ Enrollment in all grades _____

Grade Scale (please indicate the numeric range for each letter grade): A _ - _ B _ - _ C _ - _ D _ - _ F _ - _

School passing mark _____ Highest GPA possible _____ Are classes taken on a block schedule? ☐ yes ☐ no

Date final grades are available: 1st Semester/Trimester _____ 2nd Semester/Trimester _____ 3rd Trimester _____

Percentage of graduating class attending: four-year _____ two-year _____ out-of-state institutions _____

How many courses does your school offer? AP _____ IB _____ Honors _____

If school policy limits the number a student may take in a given year, please list the maximum allowed: AP _____ IB _____ Honors _____

About the Applicant:

Class rank _____ in a class of _____, covering a period from _____ to _____

(mm/yyyy)

(mm/yyyy)

The rank is ☐ weighted ☐ unweighted. How many additional students share this rank? _____

If a precise rank is not available, please indicate rank to the nearest tenth from the top _____

Cumulative GPA _____ on a _____ scale, covering a period from _____ to _____

(mm/yyyy)

(mm/yyyy)

This GPA is ☐ weighted ☐ unweighted. Highest grade/GPA in class _____

Is the applicant an IB Diploma candidate? ☐ yes ☐ no

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

☐ most demanding ☐ very demanding ☐ demanding ☐ average ☐ below average

What words first come to mind when you think of this student? _____

How long have you known this student and in what context? _____

Is this student in good academic standing? ☐ Yes ☐ No If no, please explain.

Has the applicant ever been found responsible for a disciplinary violation at your school from the 7th grade (or the international equivalent) forward, whether related to academic or behavioral misconduct, that resulted in disciplinary action, including but not limited to probation, suspension, removal, dismissal, or expulsion?

☐ Yes ☐ No ☐ School policy prevents me from responding If yes, please explain.

Please indicate whether these comments come from ☐ personal knowledge of the student or ☐ written record.

☐ Check here if you would prefer to discuss this applicant over the phone with the admission office.

Rating

Compared to others in this student's class year, how do you rate this student in terms of:

No basis		Below average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
	Academic Ability							
	Work Habits							
	Extracurricular Accomplishments							
	Personal Qualities and Character							

EVALUATION

Please write whatever you think is significant about this student. We are particularly interested in the applicant's intellectual promise, motivation, maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, enthusiasm, concern for others, respect accorded by faculty, and reaction to setbacks. We welcome information that will help us to differentiate this student from others. Consider describing or addressing:

- The applicant's academic, extracurricular and personal characteristics.
- Relevant context for the applicant's performance and involvement, such as particularities of family situation or responsibilities, after-school work obligations, sibling childcare or other circumstances, either positive or negative.
- Observed problematic behaviors, perhaps separable from academic performance, that should be explored further.

While this evaluation is a required part of every School Report, we recognize that some school counselors face formidable challenges. If your professional circumstances render you unable to provide substantive written comments about this student, please help us better understand your situation by checking one or both boxes:

☐ I do not have sufficient personal knowledge of this student. ☐ The demands of my counseling load do not afford me sufficient time.
If a box is checked, we may contact the student and request a substitute academic recommendation from another school official.

