



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 and 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? (ie 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 MAY 1.**