SUMMER BRIDGE PROGRAM COUNSELOR RECOMMENDATION FORM Applicant: High School: Date of Graduation: City: State: Zip Code: Counselor's Name: Phone: Cumulative Grade Point Average: _____ Class Rank: ____ in class of _____ (unweighted based on 4.0 scale) (e.g., $\overline{5^{th}}$ in class of 100) B=3C = 2 D = 1Grades will be converted to 4.0 scale A=4High school courses pursued by the student best described as: ☐ College Prep/AP ☐ Honors ☐ Distinguished ☐ Recommended Check the category that best describes the academic record of the applicant. ☐ Excellent ☐ Above Average ☐ Average ☐ Below Average ☐ Other Verified participation in extracurricular activities ☐ Yes \sqcap No Considering all attributes, I recommend the student: ☐ Strongly ☐ Generally ☐ With Reservations ☐ Do Not Recommend Please make other comments below which you believe are pertinent. **COUNSELOR: Please submit an academic transcript and SAT/ACT scores with this application: SUBMIT COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

Email: CAHS-Summer@pvamu.edu

Signature _____

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