



Tennessee Grocers Education Foundation

High School Record Request Form

Applicant must:

- Complete sections "1" and "2" of this form
- Mail this form to the High School Guidance Office of your graduating school.



High school records are needed for all applicants regardless of the applicant's year in college.

1. MAIL TO:

_____ High School Guidance Office
 Address _____
 City _____ State _____ Zip _____

2. FROM:

Name _____ (Maiden Name) _____
 Social Security # _____ ~ _____ ~ _____ Year of high school graduation _____
 Home address _____
 City _____ State _____ Zip _____

To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, permission is hereby given to school officials to release the secondary school record and other requested information.

Applicant's Signature _____ Date _____

Guidance Counselor:

- The student above is applying for a scholarship. Please
1. Attach a copy of the student's records and transcript.
 2. Fill boxes (on right) with requested information.
 3. Sign certification statement below.

I certify that all of the information on this form is correct, and the student's records are included.

 Counselor's Signature

 Counselor Print Name

Office Phone Number (_____) _____ ~ _____

Public HS <input type="checkbox"/>	Standard GPA	
	Average	
	Class Rank	
Private HS <input type="checkbox"/>	# in Class	
	ACT (Comp)	
Special or Magnet HS <input type="checkbox"/>	SAT-CR (not %)	
	SAT-M (not %)	
	SAT-W (not %)	



This form must be received by February 20, 2009:

**Tennessee Grocers Education Foundation
 1838 Elm Hill Pike, Suite 136
 Nashville, Tennessee 37210-3726**