

**Bethesda-Chevy Chase High School
Counseling Department**



4301 East West Highway
Bethesda, Maryland 20814

Phone: 240-497-6320
FAX: 240-497-6325

Secondary School Report

Student, please provide information:

Legal Name: _____
Last First MI Jr., etc

Student ID # _____ **Social Security # (optional)** _____

Birth Date: _____ **Male** ___ **Female** ___

Address: _____
Number and Street Apt# City or Town State Zip Code

Email Address: _____

I recognize the confidential nature of this document, and I do ___ do not ___ waive my right to have access to this recommendation.

Student Signature _____

SCHOOL COUNSELOR REPORT

Counselor Name:

CEEB Code: 210250

Email Address:

Phone #

OUR B-CC PROFILE IS AVAILABLE ONLINE AT

<http://www.montgomeryschoolsmd.org/schools/bcchs/counseling>. Scroll down to General Information and click on B-CC Profile.

The school profile provides the following information:

- Graduation requirements
- Grading system and grading scales
- Distribution of cumulative grade point averages
- List of AP, Advanced Level, Honors, and IB courses
- Standardized Testing Information

Student's Cumulative Grade Point Average: _____ *on a 4.0 scale.*

The GPA is weighted and covers the period from _____ **to** _____
mm/yyyy mm/yyyy

Ranking: *MCPS does not rank its students. Please refer to the school profile for the distribution of cumulative grade point averages for this graduating class.*

Senior Year Courses: *Please see enclosed transcript.*

Academic Rigor: *Compared to other college-bound student at B-CC, the quality and rigor of this student's academic program is **below average** _____ **average** _____ **demanding** _____ **very demanding** _____ **highest possible** _____.*

Ratings:

	No basis for judgment	Average or below	Above Average	Excellent	One of the top few
Academic Achievement					
Academic Potential					
Extracurricular Activities					
Strength of Character					

Comments: *Please see enclosed letter of recommendation.*

Recommendation: *Insufficient knowledge* _____ *Recommended* _____
Not recommended _____ *Strongly recommended* _____
Recommended with reservation _____ *Enthusiastically recommended* _____

*To my knowledge this applicant **has** _____ **has not** _____ been found responsible for a disciplinary violation related to academic or behavioral misconduct, which resulted in the applicant's probation, suspension, or expulsion.*

*To my knowledge this applicant **has** _____ **has not** _____ been convicted of a misdemeanor, felony, or other crime.*

Counselor Signature _____ **Date** _____

If this form does not meet the needs of your institution, we are willing to complete the forms you require.

