

GPA Verification Form

TO BE COMPLETED BY THE STUDENT

This form must be signed by your guidance counselor, verifying your G.P.A. on a 4.0 scale. Please complete the information below and sign & date the release of information section. Ask your high school counselor to complete the remainder of the form and return it to you to include with your application.

Applicant's Name: _____ Grade: _____

High School Name: _____

RELEASE OF INFORMATION

I grant permission to release all information regarding my G.P.A. to The City of Riviera Beach, as deemed necessary for consideration for membership to the Riviera Beach Youth Council.

Signature of Applicant _____ Date _____

Signature of Parent/Guardian _____ Date _____

TO BE COMPLETE BY THE HIGH SCHOOL GUIDANCE COUNSELOR

Please provide requested information below and return the form to the student so that s/he may submit it with the application.

High School Name: _____

The above-named student has a cumulative G.P.A. of _____ on a 4.0 scale

Student's current grade level: _____

Signature of Authorized Official

School Official's Title

Date

Email

Phone