



For office use only

## 2009-2010 AC Grant Rigorous Course of Study Validation Form

Printed Name: *last* *first* *m.i.*

Social Security #: Palomar ID #:

Street Address:

City: State: Zip:

High School Attended: Graduation Date:

I hereby authorize **High School** officials to release information regarding my high school transcript and/or academic records to **Palomar College**.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dear High School Official,

**This student may be eligible for an Academic Competitiveness Grant based on the information you provide on this form. Please return the completed form to the Palomar College Financial Aid & Scholarships Office.**

The student identified above graduated from \_\_\_\_\_ **High School** on \_\_\_\_\_ and completed the following rigorous course of study:

- Completed the California A-G Course Requirements
- Golden State Seal Merit Diploma
- AP exam# \_\_\_\_\_ Score \_\_\_\_\_ AP exam# \_\_\_\_\_ Score \_\_\_\_\_  
AP exam# \_\_\_\_\_ Score \_\_\_\_\_ AP exam# \_\_\_\_\_ Score \_\_\_\_\_
- California International Baccalaureate Exam Score \_\_\_\_\_
- Completed \_\_\_\_\_ Rigorous Course Requirement in the State of \_\_\_\_\_.

High School Seal

\_\_\_\_\_  
Print Name of Principal or Designee

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature of Principal or Designee

\_\_\_\_\_  
Date