

AUBURN FIRST

HIGH SCHOOL LETTER OF SUPPORT

Please complete the top portion and ask your high school counselor/principal to submit this letter of support with a copy of your transcript to Auburn University.

COMPLETED BY THE STUDENT

NAME: _____ DATE: _____

DATE OF BIRTH: _____ HIGH SCHOOL: _____

COMPLETED BY THE HIGH SCHOOL OFFICIAL

HIGH SCHOOL OFFICIAL NAME: _____

EMAIL ADDRESS: _____ PHONE NUMBER: _____

STUDENT'S CUMULATIVE GRADE POINT AVERAGE: _____ *based on a 4.0 scale

STUDENT'S EXPECTED GRADUATION DATE (MM/YYYY): _____

In order to be eligible to participate in Auburn First, students must have a minimum 3.0 high school GPA and have support from their high school. By signing below, I am confirming my support of the above named student to take coursework through Auburn First.

| | | |
|------------|-----------|-------|
| _____ | _____ | _____ |
| Print Name | Signature | Date |

Please mail this form with the student's transcript to the address below to verify high school support for the student to participate in Auburn First. If your school uses eScrip-Safe or Parchment you may alternatively utilize one of these electronic delivery methods to submit this letter. Receipt of this form is required for a student's Auburn First application to be complete.

Mail Letter and Transcripts to:

Auburn University
Admissions Processing
1550 East Glenn Avenue, Suite 1210 Auburn, AL 36849