

Student Profile Sheet
22nd National Tournament of Academic Excellence

_____ State/US Territory

To be completed by each team member and returned by **APRIL 24, 2009** to:

lisa.rawls@polk-fl.net or FAX: 863-968-5169

Lisa W. Rawls/Academic Competitions/P.O. Box 391/Bartow, FL 33831-0391

Student Name _____ *To appear on a certificate*
_____ *As appears on a photo ID*
_____ *Pronunciation assistance please*

School _____

Principal _____ Superintendent _____

School Address _____

School C/S/Zip _____

School Phone () _____ School Fax () _____

Home Address _____ Home Phone () _____

Home C/S/Zip _____ E-mail _____

Gender: Male Female

Grad. Date _____ **DOB** _____

SAT scores V: _____ M: _____ **ACT Composite:** _____

List w/scores AP, IB or AICE courses _____

Special awards, recognitions or scholarships:

I plan to attend: _____ College/University and have or have not been accepted.

I plan to major in: _____ to become a/an _____

What person or event has had the greatest impact on your life?