



Linked in Friendship, Connected in Service
The Long Island Chapter – Chartered October 27, 1962

GUIDANCE COUNSELOR FACT SHEET

Name of Student _____ School District _____

In addition to the transcript, kindly supply the following information in the space provided:

Class Rank _____ / _____

Unweighted GPA _____ No. of Semesters _____

SAT Scores _____ Date Taken _____ / _____ / _____

ACT Scores _____ Date Taken _____ / _____ / _____

Please complete ALL sections of this document. Information that does not apply to this candidate should be marked N/A, not applicable.

Please verify the above information by signing this document. This document **MUST** be emailed **with** the student’s application for The Links, Incorporated scholarship for consideration for an award. Should you wish to provide additional comments, please use the space provided below or attach your comments to this document.

COMMENTS: _____

Counselor’s Signature _____ Date _____ Telephone _____

Please remind students: The COMPLETED Application Deadline is March 25, 2018.