

EDISON HIGH SCHOOL--SENIOR PACKET

- ❖ **PICK UP AND RETURN FORMS TO STUDENT SERVICES**
- ❖ **FORMS DUE 15 DAYS BEFORE FIRST APPLICATION DEADLINE**

STUDENT TO-DO

- Pick up and complete transcript request form-- only for schools you are applying
Students are expected to make a written request for all transcripts needed, including applications through Common App and scholarships.
- If you are using Common App- invite your counselor as a recommender as soon as possible.
- Return Self-Assessment form- with copy of Resume-Answer the questions thoroughly for your counselors. Don't forget a resume or activities list!
- Teacher Feedback form- give the form to 2 Teachers and ask them to be returned to your counselors 15 school days before your earliest college deadline.

PARENT TO-DO

- Return "Consent for Release of Student Records in Support of Postsecondary Applications"
- Return Parent Information Form

GENERAL COLLEGE APPLICATION INFORMATION

- Use Family connection to research and track college apps
- Students are responsible for submitting application fees
- Students are responsible for submitting official test scores
- Teacher recommendation letters must be submitted to colleges by the teacher
- Students using Common App must also submit a WRITTEN transcript request, for each college
- Students are expected to make a written request for all transcripts needed

See back for transcript instructions

EDISON HIGH SCHOOL

TRANSCRIPT INFORMATION

Transcript forms can be picked up from Student Service B101B.

Students are expected to make a written request for all transcripts needed, including applications through Common App and scholarships.

- Please allow a minimum of 15 school days for processing your transcript request. Transcript requests for December due dates should be received by NOVEMBER 1. January due dates should be received by DECEMBER 1.
- The first 3 transcripts are free. After the first 3 transcripts, \$5.00 is required for each additional transcript requested. Payment is due at the time of your request (cash or check made payable to Edison High School).*
- You must request that your official scores be sent directly to the colleges (to request SAT scores: www.collegeboard.org and ACT scores: www.actstudent.org).
- Teacher Recommendations are your responsibility and will not be mailed by Edison High School.

IMPORTANT INFORMATION AND INSTRUCTIONS:

STUDENTS MUST HAVE A SIGNED PARENT RELEASE FORM ON FILE

Each transcript package mailed by Edison High School will include:

1. Your official transcript (which lists all final grades through the end of your junior year, your cumulative grade point average (GPA) and senior courses)
2. Edison High School Profile and Fairfax County Public Schools Profile
3. Secondary School Report from your Counselor
4. Mid-year grades will be sent in February- no additional request needed
5. Final senior grades will be sent in June based on senior survey answers- no additional request needed

If you have any questions regarding this form, please feel free to contact the transcript assistant at 703-924-8006. You may also contact your school counselor.

** Please see your counselor about a fee waiver if you are receiving free/reduced lunch.*

PLEASE KEEP THIS DOCUMENT FOR YOUR RECORDS



CONSENT FOR RELEASE OF STUDENT RECORDS IN SUPPORT OF POSTSECONDARY APPLICATIONS

Instructions for Use: This form is to be used by parents and/or guardians and students aged 18 or older to authorize Fairfax County Public Schools (FCPS) to release student records and related information to support student applications to colleges, universities, scholarship sponsors, employers, or other similar organizations. This consent form needs to be signed only once. The student, parent and/or guardian will use a separate form, your school's transcript request form, to identify all schools and organizations to which records may be sent.

CONSENT

By my signature below, I authorize FCPS to release to any school or organization identified by me on my school's transcript request form any of my school records or other information about me that is requested by the school or organization in support of my application. This may include, but is not limited to, my transcript, other school records, and any letters of recommendation written by FCPS employees. However, this authorization specifically excludes the release of discipline information.

By my signature below, I also authorize FCPS employees, including but not limited to, administrators, teachers, and counselors, to communicate with and respond to inquiries from the school or organization concerning my application and my credentials.

FCPS may release the required records and information by electronic or other means directly to the school or organization or to a service used by the school or organization to facilitate its application process. These services include, but are not limited to, the Common Application, Naviance, and/or Family Connection, Coalition for Access, Affordability, and Success, and other services approved by FCPS.

I also understand that I have the right to review or have copies of any records that FCPS transmits to the school or organization. If I have responded yes to the statement below, however, I have waived the right to review or have copies of any letters of recommendation written by FCPS employees.

If an application requires or requests a student's social security number (SSN), FCPS staff members should not enter the student's SSN on his or her behalf.

☐ Yes, I waive my right to review or have copies of any letters of recommendation written by FCPS employees.

☐ No, I do not waive my right to review or have copies of any letters of recommendation written by FCPS employees.

My signature below confirms that I have read and understand this consent form.

Note: Both parent and/or guardian and student are required to sign this form. Parent and/or guardian signature is not required, if the student is aged 18 or over and attending a postsecondary school.

Name of Student (Please print)

Student ID

Date

Signature of Student

Signature of Parent and/or Guardian (If student is under 18)

Edison High School Parent Information Form

Student Name	FCPS ID #	Parent/Guardian Signature	Date

Parent/Guardian Information:

	Mother	Father	Guardian
Name			
Home #			
Alternate #			
Email Address			

Parent/Guardian, please make comments and give specifics below that will aid your student's counselor in gaining insight into your child.

What story or anecdote best exemplifies your child's personality, sense of humor, sense of dedication, etc?

--

If there are any unusual personal circumstances that have affected your child's educational experience or personal development, please explain.

--

List and explain the factors that will affect your child's final college decision (in-state, tuition, location, size of campus, academic offerings, etc.)

If there is any other information you would like to share with the counselor, please use the back of this sheet.

Edison High School Student Self-Assessment

Name:	What is the best way to reach you?
Cell #	Email:

Please answer the following questions:

	Yes	No	If yes, please explain:
1. Will you be the first person in your family to attend college?			
2. Do you speak any other languages besides English?			If yes, what other language?
3. Do you plan to participate in college athletics at the Division I or II level?			

*Type your answers on a different sheet! This form helps your counselor write a recommendation and possibly nominate you for scholarships. **INCLUDE A COPY OF YOUR RESUME!** The **MORE** information, the **BETTER**.*

1. What colleges you are considering:
2. What are you most interested in studying in college? Why?
3. What 3 words best describe you? Why is each a good description?
4. What motivates you? What is your passion?
5. What has been the most satisfying course you have taken? Why?
6. Which single activity has been the most important to you? Why? (You can choose a school affiliated program or something outside of school.)
7. Reflect on your time at Edison HS. How have you changed Edison HS? How has Edison HS changed you?
8. Describe any work or volunteer experience you have had. How did the experience impact you?
9. If you had a motto to live by, what would it be? Why?
10. Talk about a time you failed. How did you respond to it? What did you learn from it?
11. Describe any unusual circumstances that may have affected your performance in school? What happened and how did it impact your grades?
12. Is your transcript an accurate measure/representation of your ability and potential? If not, what do you consider the best measure of your potential for success in college?
13. Finish this sentence: By the age of 25, I want to _____. (What motivates you on this path?)
14. What 3 things would you want your counselor to highlight in their recommendation? Please be specific.
15. Include a copy of your resume. Please see Family Connection, if you need an example.

Date Received:

Date Received: _____

EDISON HIGH SCHOOL TRANSCRIPT REQUEST FORM

ALLOW 15 SCHOOL DAYS FOR PROCESSING

Student ID# _____ Date: _____

EDISON SERVICES

Student ID#

Date:

Each student is responsible for submitting college applications and fees, and for ordering official test scores for each application. **EHS DOES NOT** mail test scores. You must request that your official scores be sent directly to the colleges (to request SAT scores: www.collegeboard.org and ACT scores: www.actstudent.org). The first 3 transcripts are free. After 3 transcripts, payment of \$5.00 is required for each transcript request. **PAYMENT ~~IS~~ UPON REQUEST. CASH OR CHECK.**

See back of this form for more information.

Student Services Section							
PRINT Name of College, Scholarship Include CITY AND STATE ONLY LIST SCHOOLS YOU WILL APPLY TO	Common App Yes or No?	Method of Application (see below)	Date Application is due at college for the type of application you are doing (See College Website)	Include counselor recommendation letter? If yes, Senior Packet must be submitted to counselor.	eDoc or Mail	Sent	Fee Paid
							N/C
							N/C
							N/C

If you have any questions regarding this form, please feel free to contact Ms. Cottingham at 703-924-8006. You may also contact your school counselor.

Edison High School Teacher Feedback Form

This form will be used to support your counselor in writing a recommendation letter and completing the Secondary School Report. This is not a recommendation letter.

Student Name:	Date Submitted:
Teacher:	Course(s):

Please return form to my counselor, _____, by (date) _____.

Teacher: Your opinion is very helpful in the development of an accurate and complete recommendation for this student. Your time and assistance are greatly appreciated.

1. List the classes and/or activities in which you have worked with this student:
2. What three adjectives do you feel best describe this student? Why?
3. How does this student contribute in the classroom?
4. In what ways can this student's academic performance be distinguished from other students?
5. What information would you include if you were writing a recommendation?

Check the most appropriate box below					
	Below Average	Average	Above Average	Excellent	One of the top few I've met
Intellectual curiosity/Interest in learning					
Classroom Involvement/Initiative					
Motivation					
Originality/Creativity					
Leadership					
Maturity					
Relationship with others					
Potential for Academic Success					
Overall Recommendation					

Edison High School Teacher Feedback Form

This form will be used to support your counselor in writing a recommendation letter and completing the Secondary School Report. This is not a recommendation letter.

Student Name:	Date Submitted:
Teacher:	Course(s):

Please return form to my counselor, _____, by (date) _____.

Teacher: Your opinion is very helpful in the development of an accurate and complete recommendation for this student. Your time and assistance are greatly appreciated.

1. List the classes and/or activities in which you have worked with this student:

2. What three adjectives do you feel best describe this student? Why?

3. How does this student contribute in the classroom?

4. In what ways can this student's academic performance be distinguished from other students?

5. What information would you include if you were writing a recommendation?

Check the most appropriate box below					
	Below Average	Average	Above Average	Excellent	One of the top few I've met
Intellectual curiosity/Interest in learning					
Classroom Involvement/Initiative					
Motivation					
Originality/Creativity					
Leadership					
Maturity					
Relationship with others					
Potential for Academic Success					
Overall Recommendation					