

Frozen & Refrigerated Association of the Northeast (FRANE) 2025 Scholarship Award Program Confidential Scholarship Transcript Information Form

For High School Seniors Only

To the Applicant: When you submit this form and your transcript, please be sure that your grades for the first semester of your senior year are included (SAT's are not required, but can be submitted). After filling in the information in the box below, give this form to your high school guidance counselor to attach to the information to be submitted with your application. If you have any questions, please frane@frane.org.

State III	s Name:	First Name		Last Name	Jr. etc.
Address:					
	Street		City	State	Zip
School Name				Telep	phone (guidance office)
Street			City	State	Zip
To the H	igh School Gu	ıidance Counselo	or: Please com	plete this form an	d return it, along with an
official co	opy of the stud	ent's transcript (v	which should in		s first semester senior yea
The follo	wing informat	ion is based on	seme	esters.	
This Stud	lent's Grade	Point Average is	on a _	scale.	
The Stude	ent's GPA is:	□weighted	unweighted		
Highest C	SPA in the clas	ss is	Mid-point		
	s Rank In Cla hool profile doe		nation, please re	port how your scho	ol determines rank in class.)
The stude	ent ranks	in a class of	The rai	nk is weighted	d u nweighted
If there ar	e other studen	ts tied at this rank	x, how many otl	ner students share	this rank?
If a precis	se rank is not a	vailable, please in	ndicate the rank	to the nearest ten	th to the top
Does you	r school offer	AP or IB course	es. If yes, how	many?	
□One to	three I Fou	ur to six	en to ten \B E	leven or more	
I certify t	hat this data i	s from a current o	and recent tran	script.	
School Off	cial's Signature			Date	
Print Name				Title	