

**ACADEMIC COMPETITIVENESS GRANT  
RIGOROUS COURSE OF STUDY  
VERIFICATION FORM**

Student ID \_\_\_\_\_

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
M.I.

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
High School Attended

\_\_\_\_\_  
Date Graduated (MM/YYYY)

I hereby authorize high school officials to release information regarding my high school transcript and/or academic records to \_\_\_\_\_ College.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

The student identified above may be eligible for an additional Federal grant in the amount of \$750 based on this verification. When verification is complete, it is the student's responsibility to return it to the \_\_\_\_\_ College Financial Aid Office.

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**High School Office Use Only**

The student identified above graduated from \_\_\_\_\_

on \_\_\_\_\_

\_\_\_\_\_  
Name of High School

\_\_\_\_\_  
Date Graduated (MM/YYYY)

and completed the following rigorous course of study:

\_\_\_\_\_  
Completed set of courses similar to State Scholars Initiative  
Completed the California A – G course requirements (does not require that student  
be accepted for admission at CSU)

\_\_\_\_\_  
Golden State Seal Merit Diploma

\_\_\_\_\_  
\*AP Exam # \_\_\_\_\_ Pass\Fail: \_\_\_\_\_ AP Exam # \_\_\_\_\_ Pass\Fail: \_\_\_\_\_

\_\_\_\_\_  
AP Exam # \_\_\_\_\_ Pass\Fail: \_\_\_\_\_ AP Exam # \_\_\_\_\_ Pass\Fail: \_\_\_\_\_

\_\_\_\_\_  
California International Baccalaureate exam score \_\_\_\_\_

**OR**

Completed out of state requirements in \_\_\_\_\_ Type of requirement \_\_\_\_\_

\_\_\_\_\_  
State

\* Must pass at least two AP exams to qualify\*

[ ] **Did not complete requirements of a rigorous course of study**

\_\_\_\_\_  
Print name of Principal or Designee

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature of Principal or Designee

\_\_\_\_\_  
Date

Please Return to  
Taft College  
29 Emmons Park Drive  
Taft Ca 93268

Ph # 661-763-7762

High School Seal

