ATTACHMENT

OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
Old Capitol Building
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OSPI

PRESIDENTIAL SCHOLARS PROGRAM
2020–21
Individual School Nomination Form

PRINCIPAL OR PRIVATE SCHOOL DIRECTOR (PRINT)	
NAME OF HIGH SCHOOL	CEEB CODE
SCHOOL ADDRESS	
CITY, STATE, ZIP	
TELEPHONE	EMAIL

Each public and private Washington state high school may nominate one (1) female and one (1) male student.

Selected Students Names:

1. _____ (Identifies as male)

2. _____ (Identifies as female)

I certify that the above-named students meet the selection requirements and that the information on the Student Nomination Form is correct.

_____ _____
Principal's Signature Date

***Return by email or postmark, no later than 5:00pm on October 16, 2020,* to:**

Ronnie Larson
Office of Superintendent of Public Instruction
Post Office Box 47200
Olympia, WA 98504-7200
Email: ronnie.larson@k12.wa.us

This page must accompany the package of selected student's application. Incomplete applications will not be considered.

This application consists of 4 pages including the Student Nomination Form and Individual School Form plus the student writing sample. All 4+ pages are required. The Office of Superintendent of Public Instruction will not assume responsibility for screening applications and notifying applicants of incomplete or missing information. Incomplete applications will be disqualified.

Office of Superintendent of Public Instruction
U.S. PRESIDENTIAL SCHOLARS PROGRAM 2020–21
STUDENT NOMINATION FORM

A. BACKGROUND INFORMATION

STUDENT NAME LAST	FIRST	MIDDLE	CEEB CODE
MAILING ADDRESS (NUMBER AND STREET)			
CITY, STATE, ZIP			

B. INVOLVEMENT & SERVICE (School & Community)

B.1 List the school activities in which this nominee has participated during grades 9–12. Please indicate by placing an "x" in the appropriate grade level(s).

Limit your response to the space provided in the table - one entry per line. Attach addendum in the same format if needed. Do not replace this format with a résumé. It will not be considered.

Student School Activities	Grade			
	9	10	11	12
Example: Band	*X*	*X*	*X*	

B.2 List non-paid community service during grades 9–12.

Limit your response to the space provided in the table - one entry per line. Attach addendum in the same format if needed. Do not replace this format with a résumé. It will not be considered.

Community Activities	Hours per Week per Grade			
Type of Service	9	10	11	12
Example: Hospital Volunteer	*5*	*10*	*15*	20

C. ACADEMIC ACHIEVEMENTS

List academic achievements, special recognition, awards, and honors received during grades 9–12. Please indicate by placing an "x" in the appropriate grade level(s). Only list commendations not previously listed. Limit your response to the space provided - one entry per line.

Achievements, Awards, Honors	Grade			
	9	10	11	12
Example: National Merit Scholar			*X*	

D. ACADEMIC STANDING

STUDENT'S NAME: _____

Please indicate below:

- Nominee's GPA _____ (4.0 Scale - Weighted GPA's are not accepted)
- Class rank _____ out of _____ (indicate by exact position: ex. 3 out of 150)
- SAT Scores: Critical Reading _____ Math _____ Writing _____
- ACT Score: Reading _____ Math _____ Combined Score _____

The nominee will graduate from:

School: _____ Date: _____

E. Please include a writing sample from each nominee. Each student's writing sample should be font size 11 or larger and limited to 1–2 pages. The student writing sample may be a previously completed classroom assignment or other writing sample. If handwritten, please check for legibility.

F. Please tell us about this student's character and leadership. What about this student makes him or her stand out as having outstanding scholarship and promise of future success?

G. What challenges are you aware of that this student has overcome while still maintaining integrity and academic success?
(Note: The answer to this question counts as 2 points; all other written responses count as 1 point each)

Note: Responses to sections F & G should be font size 12 or larger and limited to 1 page for each response.