BRUNA ERGANG
CHAIRPERSON
District 4440
Office: Av. Blumenau, 2625, s. 05
Sorriso/MT
78.890-168

TRANSCRIPT GRADE

1 - STUDENT IDENTIFICATION

Student Name: Year of Graduation:

Note: Please be sure that courses and grades from current and two previous years are included. If current grades are not available, please list current courses.

2-SCHOOL INFORMATION

School Name:

Address:

Telephone: Fax:

Name of Principal:

This school may be best described as the following (check all that apply):

☐Public   ☐Private   ☐University preparatory

☐Vocational   ☐Other (Please describe):_____

3 - STUDENT STATUS

Student's current year in school: _____

Rank in class or other grouping:_____Current GPA/average grade:_____

If your school does not rank students numerically, indicate the student's standing in relation to others in the class:

☐ Top quartile   ☐ 2nd quartile   ☐ 3rd quartile   ☐ Final quartile

By end of current school year student will have had _____ years of primary and _____ years of secondary schooling.

4 - EXPLANATION OF GRADING SYSTEM

Outstanding   =   9,5 to 10,0 or A+ or A

Very Good   =   8,0 to 9,4 or A- or B+

Good   =   7,0 to 7,9 or B or B-

Average/fair =   5,0 to 6,9 or C+ or C

Poor   =   4,0 to 4,9 or D (Insufficient)

Failing   =   0,0 to 3,9 or F (Failing)

5 - LANGUAGE PROFICIENCY

Foreign Language: _____

Proficiency   (1 = Poor, 2 = Marginal, 3 = Short Sentences, 4 = Fluent)

English

Reading	☐1	☐2	☐3	☐4
Writing	☐1	☐2	☐3	☐4
Speaking	☐1	☐2	☐3	☐4
Understanding	☐1	☐2	☐3	☐4

Other language:

Reading	☐1	☐2	☐3	☐4
Writing	☐1	☐2	☐3	☐4
Speaking	☐1	☐2	☐3	☐4
Understanding	☐1	☐2	☐3	☐4

6 - STUDENT ADVANCEMENT/ATTENDANCE

Has the student missed or repeated a year or semester?

No ☐   Yes ☐   If yes, indicate which year/semester and give reason:_____

Is there a history of frequent absences of two or more a month?

No ☐   Yes ☐   If yes, attach an explanation._____

7 - ACADEMIC STUDENT RECORDS (Examples A+, A , B+, B)

CURRENT ACADEMIC YEAR COURSES	FINAL GRADE	PREVIOUS ACADEMIC YEAR COURSES	FINAL GRADE

PREVIOUS ACADEMIC YEAR COURSES	FINAL GRADE	PREVIOUS ACADEMIC YEAR COURSES	FINAL GRADE

Sua cidade   Data   Nome diretor ou coordenador
                                                      (Assinatura e carimbo)