

**TRANSCRIPT HISTORY**

This section is to be completed by your principal or guidance counselor. Attach a certified transcript of the student’s current record to this sheet. Some information may not be available due to age of student.

Ranking in senior class: \_\_\_\_\_ of \_\_\_\_\_

GPA: \_\_\_\_\_ on a \_\_\_\_\_ scale

Best Combined SAT Score: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_

Best ACT Score: Date \_\_\_\_\_ Score \_\_\_\_\_

Signature of principal or guidance counselor \_\_\_\_\_

\_\_\_\_\_

I do state the above information is accurate to the best of my knowledge.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**TO THE STUDENT APPLICANT:** The Applicant Appraisal Form is to be completed by a school counselor or advisor, an instructor, a pastor or a work supervisor who knows you well. This form can be sent electronically to **RandonScholarship@lhcla.com** by you or the person who filled out the form, or mailed to the address listed below. It must be received by the Application Deadline of June 30.

Randon Costello Scholarship Endowment Fund  
c/o Leading Health Care of LA  
114 W. Vermilion St.  
Lafayette, LA 70501

**PLEASE NOTE:** This application form and all accompanying information must be submitted by deadline date of June 30<sup>th</sup>.