



**COLLEGE CONSULTANTS
OF SOUTH CAROLINA**

1345 Garner Lane, Suite 101-A, Columbia, SC 29210
Ph: 803.551.0097 / 888.551.0097

Student History/Basic Information

Student/Client

Name: _____

Address: _____

City, State, Zipcode: _____

Email Address: _____

Home Phone: _____

Birth Date: _____

Family Information

Father/Step-Father (Circle One)

Name: _____

Address (if different): _____

Home Phone (if different): _____ Cell Phone: _____

Email (if different): _____

Occupation/Employer: _____

Educational Level: _____

College(s) Attended: _____

Mother/Step-Mother (Circle One)

Name: _____

Address (if different): _____

Home Phone (if different): _____ Cell Phone: _____

Email (if different): _____

Occupation/Employer: _____

Educational Level: _____

College(s) Attended: _____

Student lives with (Check all that apply):

Father ___ Mother ___ Stepfather ___ Stepmother ___ Guardian ___ Other _____

Check any that apply:

Father deceased _____ Mother deceased _____

Parents divorced _____ Parents separated _____

Father remarried: _____ Mother remarried: _____

Siblings: (Name, Age, School):

Name: _____ Age _____ School _____

Name: _____ Age _____ School _____

Name: _____ Age _____ School _____

Name: _____ Age _____ School _____

Do you plan to apply for financial aid? Yes _____ No _____

Religious Affiliation: _____

Student's Academic History:

Present School: _____ Grade: _____

Weighted GPA: _____ Unweighted GPA: _____ Is this on the SC Uniform Scale: Yes _____ No _____

Class Rank: _____ Class Size: _____

Previous High School(s) Attended/Grade(s): _____

Previous High School(s) Attended/Grade(s): _____

PSAT 10th grade: Critical Reading _____ Math: _____ Writing: _____

PSAT 11th grade: Critical Reading _____ Math: _____ Writing: _____

SAT I: Critical Reading _____ Math: _____ Writing: _____ Date: _____

SAT I: Critical Reading _____ Math: _____ Writing: _____ Date: _____

SAT I: Critical Reading _____ Math: _____ Writing: _____ Date: _____

SAT II: Subject _____ Score _____ Date _____

SAT II: Subject _____ Score _____ Date _____

SAT II: Subject _____ Score _____ Date _____

PLAN: English _____ Math _____ Reading _____ Science Reasoning _____

ACT: English _____ Math _____ Reading _____ Science Reasoning _____ Date _____

| Honors and Awards Received | 8 | 9 | 10 | 11 | 12 |
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| Extracurricular School Activities | Office Held | 8 | 9 | 10 | 11 | 12 |
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| Community Service/Religious Activities | 8 | 9 | 10 | 11 | 12 |
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| Summer Programs | 8 | 9 | 10 | 11 | 12 |
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| Employment/Part-time Work Hrs/week | 8 | 9 | 10 | 11 | 12 |
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Special talents, interests, hobbies: _____

School and personal travel experience: _____

Long range educational and career goals, if known: _____

South Carolina Public School Students Only:

Career Cluster: _____

High School Major: _____

Career Goal: _____

Previous Career/Career-Related Assessments:

Name of Assessment: _____

Assessment Results: _____

Name of Assessment: _____

Assessment Results: _____

College Plans/Goal:

Possible College Major: _____

Colleges are you presently considering (If you have visited the campus, please circle the college's name):

Reasons for Contacting College Consultants of South Carolina, LLC: _____

