



Massachusetts Institute of Technology

Office of Admissions
77 Massachusetts Avenue, Room 3-108
Cambridge, MA 02139-4307

Phone: 617-253-3400
Fax: 617-258-8304

Final School Report

Instructions to Student

Enter your name and date of birth below, and deliver this form to your high school guidance office before the end of the school year. **Failure to have this form completed and returned will interrupt your registration.**

Student's last name	First name	Middle initial	Date of birth (mo/day/year)
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Instructions to School

Please furnish the information requested below as soon as possible after the final term ends. If it is more convenient to use your own form, please do so.

Subjects completed in final school year	Grade

Expected date of graduation	Class size	Class rank
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Name of high school

Signature of school official	Date
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Please return this form to the address above.