



Financial Aid Office • 901 S Haverhill Road • El Dorado, KS 67042

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Web Site: www.butlercc.edu/financial-aid

Academic Scholarship Certification Form

This form verifies academic standing for scholarship eligibility in lieu of a High School Transcript.

Student's Full Name: _____

Butler ID or Date of Birth: _____

High School Graduation Date or Anticipated High School Graduation Date: _____

Overall High School GPA (MUST include at least 6 semesters): _____

Number of Semesters Included in GPA: _____

Rank in Graduating Class: _____ Number in Graduating Class: _____

ACT Composite Score: _____ ACT Test Date: _____

SAT Critical Reading Score: _____ SAT Math Score: _____

Name of High School: _____

Address of High School

Phone Number of High School

Name of Accrediting Organization: _____

Signature of High School Official

Date

Printed Name and Title of High School Official

High School Seal

Return This Form To:

Financial Aid Office
Butler Community College
715 E 13th Street RM 5026
Andover, KS 67002