*Fill in all the boxes below*

**Proof of Honors and Activities**

This is to certify that the following student,

|  |  |
| --- | --- |
| Applicant’s Name |  |
| Date of Birth |  |

Has received the academic honor / participated (been participating) in the activity listed below:

|  |  |
| --- | --- |
| Name of Honor/Activity |  |
| Name of Institution |  |
| Duration | From:  To: |

◆Certifier’s Information

\*This form must be completed by someone from the institution or applicant’s high school.

|  |  |  |
| --- | --- | --- |
|  | Institution | Seal or Signature |
|  | Name |
|  | Position / Title |
|  | E-mail address |
|  | Date |