

THE UNIVERSITY OF MICHIGAN-FLINT



OFFICE OF ADMISSIONS
 245 UNIVERSITY PAVILION
 FLINT, MICHIGAN 48502-1950
 TELEPHONE: (810) 762-3300
 TOLL FREE (ONLY WITHIN MICHIGAN): (800) 942-5636
 FAX: (810) 762-3272
 admissions@umflint.edu
 www.umflint.edu

Counselor Recommendation Form

Student Name: _____ **SS#:** _____

Have you taken, or do you plan to take any courses in any college before entering U of M-Flint ? Yes No

If yes, when?	Where? _____
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How many total college credits will you have attempted before enrolling at UM-Flint? _____

If currently enrolled in high school or college, list all courses to be completed this year. Your courses and performances this year are considered in our final admissions decision. Please notify this office via email at admissions@umflint.edu if you change these courses.

Current Term or Semester			Next Term or Semester		
Exact Course Name	Prefix and Course No. (College Only)	No. of Credits	Exact Course Name	Prefix and Course No. (College Only)	No. of Credits

***Personal Information**

Include on a separate sheet(s) any special information (resume, personal essay, letters of recommendation) you would like the Office of Admissions to consider. This is not necessary for admission but important for scholarship consideration.

This section must be completed by school counselor or principal

Please include an official transcript of the secondary school record.			
Date of Graduation	Class Rank	Class Size	GPA
Name of School Official (please print)	Title	Telephone ()	Date
Signature of School Official			
_____ Parent Signature (required if student is under 18 years of age)			

Please return any *additional information and this form with an official transcript of the secondary school record, including ACT or SAT scores to:

The University of Michigan-Flint ~ Office of Admissions
 303 East Kearsley Street, 245 University Pavilion, Flint, MI 48502-1950