



High School Official Application Addendum

for freshman applicants applying to the University of Minnesota Duluth via the Web

To be completed by applicant (please print)

Applicant Name: _____

Date of Birth: _____

High School: _____

To be completed by high school official

Applicant ranks _____ from the top in a class of _____ students.

Rank based on academic record through: junior year half of senior year senior year

If rank is not computed, indicate decile from top: _____

Applicant has registered for: ACT - test date: ___/___/___ SAT _____ MELAB/TOEFL: _____

Additional information about the student is welcomed but not required. If there is information that would help us assist the student, please comment.

Name of certifying official (please print)	Title	E-mail address
Signature of certifying official	Phone	Date

Note: Federal and state law requires that the contents of students files be open to review by the student. Application forms, high school transcripts, test data, letters, and recommendations sent as part of any application for admission will be open to the student's review upon request, except for references for which the student has provided a written waiver of her or his right of access.

High School Officials:

Please submit this form, as well as supporting materials to:

University of Minnesota Duluth
Office of Admissions
25 Solon Campus Center
1117 University Drive
Duluth, MN 55812-3000

If you have questions, contact the Office of Admissions at:

Phone: 1-800-232-1339 or 218-726-7171
Fax: 218-726-7040
E-mail: umdadmis@d.umn.edu

Thank you.