**Statement of Educational Institution - Highschool**

To be completed by the School Counselor/School representative

This form helps Tilburg University’s International Admissions team establish a reliable and complete overview of information about the student’s educational background in more detail than the grade list alone. Submission of this form ensures that the applicant’s eligibility is accurately and promptly assessed for admission.

We would appreciate it if you could complete the form to the best of your knowledge, so that it can be included in the application to Tilburg University. You can contact us with any questions via www.tilburguniversity.edu/admission-officers.

**All applicants must provide their grades obtained in the penultimate year and most recent grades obtained in the final year (term/semester). Predicted grades are not used for the evaluation.**

**Information: student**

|  |  |
| --- | --- |
| First name(s) |  |
| Last name(s) |  |
| Date of Birth (dd/mm/yyyy) |  |

**Information: school**

The Undersigned certifies that the above-named student is currently a student at the following school:

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|  |

*\*Please give the full name and address of the school, including the country where the school is located.*

with the following diploma (please write the official name of diploma in original language, and if this is not already the case, in the Latin/Roman alphabet):

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|  |

Profile/program/specialization/section/stream/track/série (if applicable):

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| --- |
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Please indicate in Tables 1 and 2 below the subjects the student is following. Please indicate if the subject is a final examination subject or not, and if so, whether the exam will be a school exam or a central exam, such as a national exam, an International Baccalaureate (IB) exam, a European Baccalaureate (EB) or an Advanced Placement (AP) exam.**\***

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| --- |
| **Table 1: Final examination subjects** |
| **Final examination subjects** | **Level**\*\* | **Teaching hours per week (1 lesson = 1 teaching hour)** | **IB/EB/AP****(if applicable)** | **Central examination** |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |
|  |  |  |  | Yes / No  |

*\*For applicants with:*

* *an American High School Diploma: Please list all AP courses and indicate which AP exams have already been taken or will be taken. Please note that only AP exams administered by the College Board are accepted. Always include a print-out from the College Board AP Exams, signed and stamped by your school councelor / representative;*
* *a Baccalaureate General: Clearly indicate if applicable the Mathematic course in the Terminale -Mathematics Spécialité, Complémentaire* *or Experts.*

***\*\*****If applicable please indicate the level of examination. For example: basic/higher/extended/advanced*

|  |
| --- |
| **Table 2: Additional subjects taken during the final year** |
| **Subject name** | **Level\*** | **Teaching Hours per week** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

*\*If applicable please indicate the level of examination. For example: basic/higher/extended/advanced*

The above-named student is expected to graduate on/receive the diploma/certificate on (dd/mm/yyyy)\*:

|  |
| --- |
|  |

*\*If the exact date of graduation is not yet known, please add only the month and year in which the student will graduate. This date should be before September 1, 2024.*

I can confirm that the above information is true at the date of signature.

|  |  |
| --- | --- |
| Date (dd/mm/yyyy) |  |
| Name school counselor / representative |  |
| E-mail address school counselor / representative |  |
| Signature school counselor / representative |  |
| School stamp (The form may expand as you complete it. If it extends beyond 1 page in length, please stamp all pages of this form) |  |