



JUNIOR FELLOWS NOMINATION FORM

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High School \_\_\_\_\_ CEEB Code \_\_\_\_\_

High School Address \_\_\_\_\_ Telephone \_\_\_\_\_

Awards Ceremony Date \_\_\_\_\_ Guidance Counselor \_\_\_\_\_

Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

Lander Junior Fellow Nominations

Please note that you are only required to enter one test score.

Name \_\_\_\_\_
First MI Last

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

GPA \_\_\_\_\_ Rank \_\_\_\_\_ PSAT \_\_\_\_\_ SAT CR \_\_\_\_\_ M \_\_\_\_\_ ACT Comp \_\_\_\_\_

Counselor Recommendation/Student Activities:

Name \_\_\_\_\_
First MI Last

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

GPA \_\_\_\_\_ Rank \_\_\_\_\_ PSAT \_\_\_\_\_ SAT CR \_\_\_\_\_ M \_\_\_\_\_ ACT Comp \_\_\_\_\_

Counselor Recommendation/Student Activities:

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First MI Last

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

GPA \_\_\_\_\_ Rank \_\_\_\_\_ PSAT \_\_\_\_\_ SAT CR \_\_\_\_\_ M \_\_\_\_\_ ACT Comp \_\_\_\_\_

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GPA \_\_\_\_\_ Rank \_\_\_\_\_ PSAT \_\_\_\_\_ SAT CR \_\_\_\_\_ M \_\_\_\_\_ ACT Comp \_\_\_\_\_

Counselor Recommendation/Student Activities:

