



Helping people achieve education and workplace success.

Applications are open for the ACT Student Champion Award! The ACT Student Champion Award recognizes one student in each state who is tenacious and persistent, no matter the challenge, and is prepared for life after high school with a goal in mind and plan in place.

ACT Student Champions receive a \$500 non-renewable scholarship, certificate, plaque, and state-level recognition.

Please encourage students in the graduating class of 2018 who have taken the ACT who fit the following criteria to apply:

- A student who has overcome challenges and can articulate education and career actions
- Students must have a composite ACT score of a 22 on a single test date or a 3.0 or greater on a 4.0 scale
- Preference will be given to underrepresented and/or first-generation college students.

Applications can be found at [www.act.org/readinesschampions](http://www.act.org/readinesschampions). Applications are **due December 31, 2017**, and champions will be **notified on or before April 2, 2018**. If applicants are under the age of 18, they must complete the form below in addition to the application.

**AUTHORIZATION  
TO RELEASE PERSONAL INFORMATION**

I, \_\_\_\_\_,  
(your full name)

hereby consent to the release of any and all records in the possession of ACT, Inc. ("ACT") which are in any way related to me, for the purpose of my nomination for the Student Readiness Award provided through the ACT College and Career Readiness Campaign. The records relevant to the nomination may include:

name, address, date of birth, gender, race/ethnicity, expected education level, ACT Explore scores, ACT Plan scores, scores on the ACT college readiness assessment, core high school course grades, high school GPA, extracurricular activities, and out-of-class accomplishments.

ACT is authorized to release and make full disclosure of such records, and to discuss any information relating to those records, to members of the ACT State Council of the state in which you reside, for which individual membership information is available at <http://www.act.org/stateorgs/index.html>.

This authorization is effective immediately and will remain in effect until revoked in writing.

I hereby release and hold harmless ACT and its agents from any and all claims and actions based upon, arising out of, or relating in any way to any disclosure of records or information pursuant to this AUTHORIZATION TO RELEASE PERSONAL INFORMATION.

A copy of this document shall serve as the original.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

If the above-named individual is under the age of 18, the parent or legal guardian of the individual must also sign below indicating consent and agreement to this AUTHORIZATION TO RELEASE PERSONAL INFORMATION.

Signature of Parent  
or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Please complete and send to:

[CCRC@act.org](mailto:CCRC@act.org) (preferred)

OR

Heidi Vekemans  
ACT State Organizations Program Manager  
500 ACT Dr.  
Iowa City, IA 52243