

A. Statement of Understanding (Signature Required)

I have read and understand the policies and procedures of the Wilbraham & Monson Academy College Counseling Office.

Please Print Student's Full Name:

Signature of Student

Date

Signature of Parent

Date

This form must be signed and submitted to the College Counseling Office by Oct. 15. Please mail the signed form to: Wilbraham & Monson Academy, Attn. Sandi Scott. You may also scan and email it to sscott@wma.us, or fax to 413.596.2448.