



Certification of Class Ranking

This student has self-identified at Mercer County Community College that he/she is eligible to take part in the NJSTARS scholarship program. New Jersey state regulations governing this program state that a student is eligible for this program only if he/she was ranked in the top 15 percent of his/her graduating class upon completion of their senior year. Please verify this student’s class rank status by completing this form and mailing to:

Mercer County Community College
Office of Financial Aid
PO Box 17202
Trenton, NJ 08690
FAX: 609-570-3888
Attn: Bilquis Zaka

Student Name: _____
(Please Print)

Soc. Sec. #xxx-xx _____
MCCC ID # _____

To Be Completed by High School Official (must be completed even if high school does not normally rank its students)

Year of Student’s Graduation ____/____/____

Number of Students in Graduating Class: _____

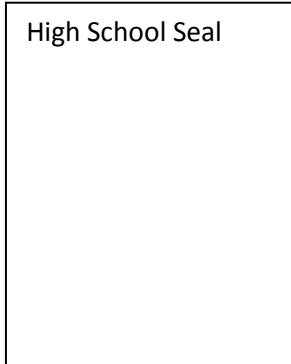
Placement in Graduating Class for this student: _____ (e.g., this student graduated 10th in class of 255)

Class Ranking: _____ (e.g. 10/255=4%)

Printed Name of
Certifying Official: _____

Signature of
Certifying Official: _____ Date: _____

Title of
Certifying Official: _____



This form is not official unless the High School Seal is affixed.