



2018-2019 High School Completion Information and Identity/Statement of Educational Purpose

Student Name		Stud	Student ID#	
High Scl	hool Completion Information			
_	ONE of the following documents to indicate the st	udent's high school completion status when the	e student begins college in 2018-2019.	
	A copy of the student's high school diploma			
	A copy of the student's final, official high school transcript that shows the date when the diploma was awarded			
	A state certificate or transcript received by the student after the student passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma. (GED test, HiSET, TASC, or other State-authorized examination)			
	For students who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document.			
	An academic transcript that indicates the student successfully completed at least a two year program that is acceptable for full credit towards a bachelor's degree			
	For a student who was homeschooled in a State where State law requires the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a copy of that credential.			
A st		t), a transcript or the equivalent, signed by the stude cudent successfully completed secondary school educ	ē.	
	y and Statement of Educational Purpos			
issued pho photo ID the studer	oto identification (ID), such as, but not limited to	, a driver's license, other state-issued ID, or pa t was received and reviewed, and the name of t	or her identity by presenting an unexpired valid government- assport. The institution will maintain a copy of the student's the official at the institution authorized to receive and review ment of Educational Purpose provided below.	
	I certify that I am the individual signing this Statement of Educational			
	(Print Student's Name) Purpose and that the Federal student financial as Texas Tech University Health Sciences Co		acational purposes and to pay the cost of attending	
	(Student's Signature)	(Date)	(Student's ID Number)	
If the stud		University Health Sciences Center to ver	rify his or her identity, the student must provide to the	
1. 2.	. A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and			
<u>Notary's Certificate of Acknowledgement</u>				
State ofCity/County of				
	On, before me,,			
	(Date) personally appeared,	, and provid	(Notary's name), and provided to me on basis of satisfactory evidence of	
		nted name of signer)	·	
	identification(Type of government-issued photo II	to be the above-named person provided)	son who signed the foregoing instrument.	
	WITNESS my hand and official seal (Notary signature)			
		My commission expires on	(Date)	
To be o	completed by HSC Fin. Aid Advisor	For Office Use Only		
ID Type:			☐ RNANAxx Lock Current Record	
ID Num		☐ ROASTAT verification complete		
		□Scan/Index	□Update FAA Access Identity Verif.	
Rec'd B	y:	FAA Signature:	Date:	
Signatur	,	AD Signature:	Date:	

V-4 & V-5; HIEP18 phone: 806-743-3025