MAIL THIS FORM TO: **SUNY New Paltz** Financial Aid Office 200 Hawk Drive New Paltz, NY 12561

2017-2018 High School Completion Certification

Student's Info	ormation:	`	
Last Name	First Name	M.I.	Student ID Number
Street Address			Date of Birth
City, State, Zip Code			Phone Number (include area code)
Name of High Sch	nool		Date of High School Graduation
High School C	Completion Status D	ocumentatio	on:
	e of the following docum t begins college in 2017-2		e the student's high school completion status
 A copy of diploma A copy of received State rec 	was awarded. f the student's GED certif by a student after the stu ognizes as the equivalent	al high school tra icate, official GEI udent has passed of a high school	inscript that shows the date when the or transcript a State-authorized examination that the diploma.
• An acade	mic transcript that indica	ites the student s	successium completed at least a two-year

- ript
- program that is acceptable for full credit toward a bachelor's degree.
- If State law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
- If State law does not require a homeschooled student to obtain a secondary school completion credential (other than a high school diploma), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and
- who

setting.	ertificate" or other similar document for students reign country.
I certify that the information reported is complete an	d correct.
Student signature	Date