

2023-2024 EDUCATIONAL HISTORY FORM

Address:

Phone:
(559) 494-3012

Fax: (800) 643-0932

Email:

(800) 643-0932 995 N. Reed Ave. reedley.financialaid@reedleycollege.edu

NAME:	SSN or ID #:			
HIGH SCHOOL INFOR	MATION			
Check the ONE box that best describes your high school gradue I am currently attending high school. Anticipated graduat I am a high school graduate. Graduation date:/	ion date:/			
Name of high school:	-			
I passed the General Educational Development (GED) Tes	t. Date passed: _	/	/	
I completed the equivalent to a high school diploma in a Name of country:		ion date:	://	
I passed the California High School Proficiency Examination	i (CHSPE). Date p	assed:	//	
I am not a high school graduate, and I have not met the reabove.	equirements for a	ny of the	e equivalencies listed	
PRIOR COLLEGE HISTORY				
List all other colleges you have attended, even if you did not a school. You must submit official academic transcripts from each Admissions and Records Office. Reedley College Financial Aid Offic of all academic transcripts before your financial aid is awarded.	school listed belo ice reserves the r	w to the ight to re	Reedley College equire evaluation	
 I have attended the following college(s): Name of College Dates Attended 	Number of Units Attempted		Type of Degree/ Certificate Earned	
Do you have a BA/BS degree or beyond in the U.S. or in a foreign country	/? Yes	No		
Are you currently enrolled in a Master's or Doctorate Program?	Yes	No		
STUDENT CERTIFICATIO	ON			
I certify under penalty of perjury under the laws of California, that the False statements, undisclosed information, or misrepresentation is caus of financial aid.				
Student Signature:	Date:			