

Office of Financial Aid Services

183 Strand Union P.O. Box 174160 Bozeman, MT 59717-4160 www.montana.edu/wwwfa

Tel (406) 994-2845 Fax (406) 994-6962

Student Name:	MSU ID:
Email address:	Phone Number:
2019-20 Verification of High School Completion	
The Office of Financial Aid Services is req following documents to indicate your high	uired to verify your high school completion. Please provide <u>one</u> of the school completion status.
A copy of the student's high school dip	ploma.
For students who completed seconda certificate" or other similar document.	ary education in a foreign country, a copy of the "secondary school leaving
A copy of the student's final official high	gh school transcript that shows the date when the diploma was awarded.
	d by a student after the student passed a State-authorized examination that ent of a high school diploma (GED test, HiSET, TASC, or other State-
	licates the student successfully completed at least a two-year program (60 it toward a bachelor's degree. Associate Degree will also be sufficient.
• •	or Credential. For a student who was homeschooled in a state where state econdary school completion credential for homeschooling that is equivalent
 a. If your state does not require options. 	e a Home School Certificate of Credential, please contact our office for
A student who is unable to obtain the Services.	he documentation listed above must contact the Office of Financial Aid

Next page - you must complete and submit page 2.



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Student Name:	MSU ID:
	Statement of Educational Purpose ne Office of Financial Aid Services)
identity by presenting an unexpired valid government-iss	University-Bozeman Office of Financial Aid Services (OFAS) to verify your used photo identification (ID), such as, but not limited to, a driver's license, upy of your photo ID that is annotated by OFAS with the date it was received eceive and review your ID.
In addition, the student must sign, in the presence of an C	PFAS staff, the Statement of Education Purpose provided below.
Statemen	nt of Educational Purpose
I certify that I	am the individual signing this Statement of
Educational Purpose and that the federal stude	am the individual signing this Statement of ent financial assistance I may receive will only be used for nding Montana State University – Bozeman for 2019-20.
Student's Signature	Date
	Statement of Educational Purpose e Signed With Notary)
verify your identity, you must submit both of the following (a) A copy of the unexpired valid government-issued pho	to identification (ID) that is acknowledged in the notary statement below, or to a driver's license, other state-issued ID, or passport; and
Notary's Cer	tificate of Acknowledgement
State of City/County of	
On, before me,	(Notary's name)
personally appeared,	ted name of signer) , and provided to
me on basis of satisfactory evidence of Identifica	ition to be (Type of government-issued photo ID provided)
the above-named person who signed the forego	ing instrument.
WITNESS my hand and official seal (seal)	

(Notary signature)

(Date)

My commission expires on ___