

**APPLICATION CERTIFICATION FORM**

This form is to be completed by the applicant's high school principal or counselor and returned to the applicant as soon as possible. If applicant is not currently in high school, but has completed a GED, this must be signed by a Certified Administrator for the GED program.

*Please type or use black or blue ink.*

NAME OF APPLICANT \_\_\_\_\_

ADDRESS OF APPLICANT \_\_\_\_\_

NAME OF HIGH SCHOOL/GED PROGRAM \_\_\_\_\_

ADDRESS OF HIGH SCHOOL/GED PROGRAM \_\_\_\_\_

AT THE CLOSE OF THE **SEVENTH SEMESTER**, THE APPLICANT'S GPA (4.0 scale) WAS \_\_\_\_\_

THE APPLICANT DID **NOT** COMPLETE HIGH SCHOOL, THE SIGNATURE BELOW TESTIFIES TO SATISFACTORY COMPLETION OF THE GED PROGRAM.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT OR TYPE NAME \_\_\_\_\_

TITLE \_\_\_\_\_

TELEPHONE \_\_\_\_\_