

## 2014-2015 High School Completion Status Form Name of Financial Aid Applicant (Please Print)

| RETURN TO: San Bernardino Valley College Financial Aid Office – AD/SS 106 701 S. Mt. Vernon Ave. San Bernardino, CA 92410                    | Last First Date of Birth:  Month Day |                  |  | Middle<br>Year   |
|--|--------------------------------------|------------------|--|------------------|
|  | Student ID#:                         | Social Sec#      |  |                  |
| Student's High School C  | Completion Inform                    | nation           |  |                  |
| Provide one of the following docum student will begin college in 2014-2  |                                      | e student's high | school completion s                                    | status when the  |
| <ul> <li>□ A copy of the student's hig</li> <li>□ A copy of the student's finewas awarded.</li> <li>□ A copy of the student's Ger</li> </ul> | al official high school              |                  |  |                  |
| If the student is unable to obtain the the section below and contact the fir   |                                      |                  | _  | circumstances in |
| Certification and Signate  I certify that all of the information reported  |                                      | WARNING KAN      |  |                  |
| is complete and correct. The student must s  |                                      |                  | u purposely give false or<br>u may be fined, be senten |                  |
| Student's Signature  |                                      | Date             |  |                  |

\*\*DO NOT MAIL THIS FORM TO DEPT OF EDUCATION - PLEASE SEND TO THE SBVC FINANCIAL AID OFFICE.\*\*

HSCS (2014-2015) ms

В.