



Umpqua Community College  
 Financial Aid Office  
 PO Box 967  
 Roseburg, Oregon 97470  
 541.440.4602 | 541.440.4612 (FAX)  
 FinancialAid@umpqua.edu

## Statement of High School Status

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

**Students must meet one of the following criteria before receiving federal financial aid:**

- Earn a high school diploma
- Earn a GED
- Complete home-schooling at the high school level (and, if under 18, a current ESD registration)
- Complete a state recognized high school proficiency exam (not applicable in Oregon)
- Documentation of excelling in high school (not applicable in Oregon or for certificate students)
- An academic transcript that indicates you successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.
- Qualify under the prior Ability-to-Benefit rules - Before July 1, 2012 documented placement exam scores that met Ability-to-Benefit minimums and have maintained continuous enrollment since that time in an eligible program.

**Attention:** Do NOT submit this form until after you have completed one of the above requirements. Funds will not be disbursed until a completed form has been received by the Financial Aid Office.

**Complete the appropriate statement, sign below, attach documentation, and return to the Financial Aid Office:**

- I earned my high School diploma \_\_\_\_\_ at \_\_\_\_\_.  
(Provide Copy) (Month/Year) (Name, City, and State of High School)
- I earned my GED \_\_\_\_\_.  
(Provide copy) (Month/Year)
- I completed high school in a home-schooling setting \_\_\_\_\_.  
(Month/Year)  
*(Provide a signed statement from the parent/guardian the student successfully completed secondary school education in a homeschool setting and a copy of the transcript showing classes completed and grades)*
- I passed a state recognized high school proficiency exam \_\_\_\_\_ in \_\_\_\_\_.  
(Documentation of passing exam) (Month/Year) (State)
- I meet this requirement by excelling in high school (provide documentation).
- I have completed a two-year program that is acceptable for full credit toward a bachelor’s degree (provide official transcripts).
- I qualify under the prior Ability-to-Benefit rules listed above.

By signing below, I certify that the above information is true and correct. I also understand that if I give false or misleading information, I may be fined up to \$20,000, sent to prison, or both.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_