2020-2021 High School Completion, Identity and Statement of Educational Purpose Worksheet

Please return to:  
Office of Financial Aid  
B-5 Converse Hall  
Box 5000  
Amherst, MA 01002-5000  
(413) 542-2628 fax  
finaid@amherst.edu

STUDENT INFORMATION

Student’s Name ___________________________________________ Date of Birth _______________
Amherst ID Number: ________________________ Phone number__________________________

HIGH SCHOOL COMPLETION STATUS

Please provide one of the following documents that indicate the student’s high school completion status when the student will begin college in 2020–2021:

☐ A copy of the student’s high school diploma.

☐ A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.

☐ A copy of the student’s General Educational Development (GED) certificate or GED transcript.

☐ An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.

☐ If State law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.

☐ If State law does not require a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and documents the successful completion of a secondary school education in a homeschool setting.

If the student is unable to obtain the documentation listed above, he or she must contact Office of Financial Aid.

CERTIFICATION AND AUTHORIZATION

I declare that the information on this form is true, correct, and complete. Amherst College has our permission to verify the information reported by obtaining documentation as needed (the student and at least one parent or student’s spouse, if applicable, must sign).

Student Signature ___________________________________________ Date _______________

Parent/Spouse Signature ___________________________________________ Date _______________

Please proceed to page 2.
IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE  
(To Be Signed at the Institution)

The student must appear in person at ___AMHERST COLLEGE, OFFICE OF FINANCIAL AID____ to 
verify his/her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s li-
cense, other state-issued ID, or passport. The institution will maintain a copy of the student’s photo ID that is annotated with the date 
it was received and the name of the official at the institution authorized to collect the student’s ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I _________________________________ am the individual signing this Statement of Educational Purpose
(Print Student’s Name) and that the federal student financial assistance I may receive will only be used for educational purposes and 
to pay the cost of attending _______AMHERST COLLEGE____________ for 2020-2021.
(Name of Postsecondary Educational Institution)

____________________________________    ________________
(Student’s Signature)        (Date)
______________________
(Student’s ID Number)