

ID # _____

Name _____

Circle One: Residential or LU Online

High School Graduation Self-Certification

Please **check only one box** that designates your status and provide the appropriate information below based on the first day you plan to attend Liberty University:

I certify that I have successfully graduated from high school.

First and last name under which you attended: _____

Name of high school (or homeschool): _____

Location (City and State): _____

Month and year of your high school graduation: _____

I certify that I have successfully completed a federal aid eligible homeschool program.

Homeschooled students are eligible to receive federal aid funds if their secondary school education was completed in a homeschool that state law treats as a home or private school. The homeschool program must be equivalent to the requirements of a high school diploma. Some states issue a secondary school completion credential to homeschoolers. If this is the case in the state where the student was homeschooled, he or she must have obtained this credential in order to be eligible for federal aid funds.

First and last name under which you attended: _____

Name of homeschool program: _____

Location (City and State): _____

Month and year of your homeschool completion: _____

I certify that I have successfully completed a General Education Development (GED) program.

First and last name under which you earned your GED: _____

Name of Institution: _____

Location (City and State): _____

Month and year you earned your GED: _____

I certify that I have NOT graduated and received a high school diploma, federal aid eligible homeschool credential or GED.

"By signing below, I authorize any previous educational institution or agency to release educational records (including transcript, diploma, or degree documents) to Liberty University."

If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both; may be expelled from Liberty University; will lose all federal, state and institutional aid; and will be reported to the Office of Inspector General and/or the Commonwealth Attorney for the State of Virginia for further investigation. Falsification could also result in expulsion from Liberty University.

Signature: _____ **Date:** _____

Complete and return this form by email or fax to:

Liberty University Registrar Office

Email: registrar@liberty.edu

Fax: (434) 582-2187

Phone: (434) 592-5100

Address: 1971 University Blvd., Lynchburg, Virginia 24502