

Admission Services

Affidavit of Completion of Secondary School Education

This form should be submitted to Arizona State University upon completion of secondary school education.

Student name					
Student SSN			Student ASU IE)	
Student date of birth	Day:	/ Month:	/ Year:		
I, the undersigned, do here home school setting on the					ion in a
Graduation date	Day:	/ Month:	/ Year:	State:	
Parent name					
Address					
City			State	Zip Code	
Phone				•	
Parent Signature					
Please return completed Admission Services Appl Processing Arizona State PO Box 871004 Tempe, AZ 85287-1004	icant				
OR					
transcripts@asu.edu					