



AFFIDAVIT OF HIGH SCHOOL/GED COMPLETION

I, \_\_\_\_\_, certify that I have a high school diploma, home school certificate of completion, or a General Education Development (GED) Certificate. I will provide a copy of my high school transcript, high school diploma or GED Certificate to University of the Potomac within 30 days after the start of my program. I understand that I am not eligible to participate in federal student aid programs or other financial assistance until I provide the appropriate documentation. I also understand that if I do not provide this documentation, I risk being withdrawn from all courses registered and may be subject to other consequences.

\_\_\_\_\_  
(Print Last Name, First Name, Middle Initial)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Date

If, for unforeseen circumstances, I am unable to provide this documentation, my signature above also authorizes University of the Potomac or their representative to obtain my educational transcripts and/or records.

I certify that all information provided in connection with this form is true, accurate and complete. I agree that this form in original, faxed, photocopied and electronic (including electronically signed) form will be valid for any background reports that may be requested by or on behalf of University of the Potomac.

OFFICIAL TRANSCRIPT REQUEST

Institution Attended: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Name at Time of Attendance: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_

Did You Graduate? YES  NO

Please release by transcript to:  
Attn: Office of the Registrar  
University of the Potomac  
1401 H Street, N.W., Suite 100, Washington, D.C 20005  
202-274-2300