

Financial Aid

1101 E University Ave, Fresno, CA 93741 | Phone: (559) 442-8245 | FAX: (559) 499-6024

2024-2025 EDUCATIONAL HISTORY

Student Name:		Stud	_ Student ID #:	
HIGH SCHOOL EDUCATIONAL I Select the option below that bes		ol graduation status.		
☐ I am currently attending high	school. Anticipated graduation	on date: / / /	_	
☐ I am a high school graduate.				
Graduation date:/ Name of High School: City/State:				
☐ I passed the General Educat	ional Development (GED) Te	st. Date passed:/	_/	
☐ I completed the equivalent to	a high school diploma in a fo	oreign country:		
Name of country:		Gradua	ation date: / /	
☐ I passed the California High School Proficiency Examination (CHSPE). Date://				
☐ I passed the Ability to Benefit (ATB) test administered by Fresno City College. Date passed://				
☐ I passed the Ability to Benefit (ATB) test administered by another eligible institution. Date passed: / /				
	2. For qualifying enrollment el		l if you were enrolled in an eligible Prior College History Section	
☐ I am not a high school graduate and have not met the requirements for any of the equivalents listed above.				
List all other colleges you have Submit sealed official academic to Aid Office reserves the right to req I have not attended any othe Madera Community College, I have attended the following	transcripts from each prior sc juire evaluation of all academ or colleges besides Fresno Cit or Oakhurst Center.	hool attended to our office. Th ic transcripts before any finan	e Fresno Čity College Financial cial aid is awarded.	
Name of College/University	Dates Attended	Number of Units	Type of Degree/Certificate	
		Attempted	Earned	
☐ I have earned a BA/BS degre	ee or beyond in the U.S. or in	a foreign country.		
☐ I have NOT earned a BA/BS	degree or beyond in the U.S	or in a foreign country.		
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	s that all of the information nation, you may be fined, s	sent to prison, or both. Sig	rect. Warning: If you purposely natures must be provided in blue	
Student Signature:			Date:	