

Affidavit of Completion of Secondary School Education

This form should be submitted to University of Montana upon completion of secondary school education					
Student Name					
Student UM ID					
Student date of birth	Day:	Month:		Year:	
I, the undersigned, do home school setting					ndary school education in a elow.
Graduation date	Day:	Month:		Year	:
Parent/Guardian nam	е				
Address					
City			State		Zip Code
Phone					
Parent/Guardian sign	ature				

Please return completed form to:

University of Montana Admissions Gilkey Building 950 Arthur Avenue Missoula, MT 59812

OR

admiss@umontana.edu