UNIVERSITY OF ILLINOIS AT CHICAGO – Office of Student Financial Aid and Scholarships
1200 W. Harrison Street, M/C 334 -- Chicago, Illinois 60607-7163 -- Phone: (312) 996-3126
College of Medicine: 808 S. Wood Street, M/C 782 -- Chicago, Illinois 60612-7301 -- Phone: (312) 413-0127

2021-2022 Statement of Educational Purpose and High School Completion Status

Section A – Student Information (Please print clearly)

Last Name | First Name | M.I. | Email

Street Address | City | State | Zip Code

What you should do:

Provide one of the following documents that indicate the student's high school completion status:
A) A copy of high school diploma,
B) A copy of final official high school transcript that shows the date when the diploma was awarded,
C) A copy of General Educational Development (GED) certificate,
D) If completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document,
E) An academic transcript that indicates you successfully completed at least a two-year program that is acceptable for full credit toward a bachelor's degree, or
F) If homeschooled, a copy of the state credential (if required by state law), or a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses completed and includes a statement that the student successfully completed a secondary school education in a homeschool setting (if a certificate is not required by state law).

Section B – Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of
(Print Student's Name)
Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the University of Illinois at Chicago (UIC) for 2021-22.

_____ _____
(Student's Signature) (Date)

_____
(Student's ID Number)

ENTER YOUR 9-DIGIT **UIN** →

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