

EDUCATION DATA SHEET

Name _____
Social Security Number (last four digits only) _____

Please complete this transmittal sheet to ensure accurate input of educational information into the records system. Official transcript or copy of official transcript must accompany Education Data Sheet for verification of educational information.

*Note – Diplomas, certificates, or grade reports will not substitute for an official transcript.

1. Education Level – Circle the highest level.

- | | |
|--|--------------------------------|
| 00 – NA | 12 – Four years college |
| 01 – Some elementary school | 13 – Bachelor’s degree |
| 02 – Elementary school | 14 – Post-Bachelor’s |
| 03 – Some high school | 15 – First professional degree |
| 04 – High school graduate or GED | 16 – Post-first professional |
| 05 – Terminal occupational program- not complete | 17 – Master’s degree |
| 06 – Terminal occupational program- complete | 18 – Post-Master’s |
| 07 – Some college – Less than one year | 19 – Sixth year degree |
| 08 – One year college | 20 – Post-sixth year |
| 09 – Two years college | 21 – Doctorate degree |
| 10 – Associate degree | 22 – Post-Doctorate |
| 11 – Three years college | |

- *Note - Some college = (Less than 30 semester hours/45 quarter hours)
One year college = (30-59 semester hours/45-89 quarter hours)
Two years college = (60-89 semester hours/90-134 quarter hours)
Three years college = (90-119 semester hours/135-179 quarter hours)
Four years college = (120+ semester hour/180+ quarter hours) and (no degree)

2. Field of study _____

3. Minor Major

4. Year degree attained _____

5. Credit hours _____

6. Credit type – (Please circle one only) Semester / Quarter

7. Type of school – (Please circle one only) College/University
Junior college
Vocational/Tech school

8. Academic institution name _____

I certify that all information provided is correct to the best of my knowledge.

Signature _____ Date _____