FOR NONACCREDITED SCHOOLS ONLY **Oklahoma's Promise Program Verification**

OH02

This form must be completed using **blue or black ink** and signed by the local OKPromise contact person or the school superintendent or his/her designee. The State Regents' office will determine final eligibility.

(Last) (First) (Middle) Check here if new address (make any necessary corrections below) Current Address: (ZIP) Social Security No. (Mailing Address) (City) (State) (ZIP) Social Security No. (Mailing Address) (City) (State) (ZIP) Social Security No. (Mailing Address) (City) (State) (ZIP) COMPLETERS: Checklist for students completing the OKPromise program requirements: Yes Completed the required 17-unit OKPromise Core curriculum Yes 2.5 Cunulative GPA: 2.5 OKPromise Core Curriculum GPA: Yes Yes Achieved a 22 composite score or higher on a national ACT test, ACT Score	Student's Name:							
Current Address:		-	(Last)		(First)	(Middle)		
(Mailing Address) (City) (State) (ZIP) Social Security No.		□ Check here if new address (make any necessary corrections below)						
Social Security No.		Current Address:						
COMPLETERS: Checklist for students completing the OKPromise program requirements: Yes Graduated from high school; graduation date:		Social Security N			(City)	(State)	(ZIP)	
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Signature of School Contact Person: _____ Date: _____ Date: _____

School Contact Person: Mail this form, the student's final transcript and copy of the ACT test results to: Oklahoma's Promise, Oklahoma State Regents for Higher Education, PO Box 108850, Oklahoma City, OK 73101-8850