## **Class Schedule/Transcript Attestation Form**

**Instructions for Submission:** Please ensure this form is fully completed, scanned, and uploaded with your electronic application. If you encounter any issues or require clarification, contact our scholarship team at 907-793-3575 or visit our office at 3201 C St, Suite 506, Anchorage.

Comm	nitment to Provide Class Schedule/Transcripts:	
•	For Missing Schedule: I commit to uploading my schedule from	by
•	For Missing Transcripts: I will have my transcript from	_ uploaded by
	erstand that failure to provide these documents by the specified dates will resul incomplete and not processed.	t in my application
inform comple mainta	Compliance Confirmation: By signing this document, I confirm that I understanged of the class registration and application submission policies. I recognize the leting and attaching this form with my application to qualify for funding. I acknown ain my eligibility for funding, it is crucial to submit my class schedule by the date to comply with these policies.	necessity of owledge that to
Studei	nt Information:	
•	Name:	
•	Student ID:	
•	Program of Study:	
•	Anticipated Enrollment Date:	