

**ASSURANCE OF HSED COMPLETION  
OPTION 3  
POSTSECONDARY DEGREE**

*Directions: Once a participant has successfully completed all the requirements for this HSED Option, fill out this assurance, sign, and upload it in DiplomaSender™.*

**Comprehensive Intake**

\_\_\_\_\_ Participant completed a comprehensive intake that consists of each of the following components. Documentation or evidence of these intake items are maintained in the participant's file.

\_\_\_\_\_ Completed a registration or enrollment form

\_\_\_\_\_ Assessed participant's reading level

\_\_\_\_\_ Assessed participant's career interests and aptitudes

\_\_\_\_\_ Discussed program options

\_\_\_\_\_ Developed an action plan

**Residency**

\_\_\_\_\_ Participant has been a resident of Iowa at least 90 days prior to the beginning of this application.

**Official Transcripts**

\_\_\_\_\_ Participant provided official transcripts from a regionally accredited postsecondary institution that documented completion of a postsecondary degree that was equivalent to an associate degree or higher that included general education coursework.

**Required Uploads to DiplomaSender™**

\_\_\_\_\_ Proof of age

\_\_\_\_\_ Proof of Iowa residency

\_\_\_\_\_ Official postsecondary transcripts

\_\_\_\_\_ Assurance of HSED completion (this form)

**Name of Participant:** \_\_\_\_\_

**SSN # or College ID:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Verified by (signature):** \_\_\_\_\_

**Title:** \_\_\_\_\_