



## EDUCATIONAL INFORMATION FORM

(Please attach a separate form if necessary.)

### High School

Name: \_\_\_\_\_  
City, State: \_\_\_\_\_  
Dates Attended: from \_\_\_\_\_ to \_\_\_\_\_

Diploma Obtained

☐ Yes

☐ No

### Undergraduate College or University

School #1: \_\_\_\_\_  
City, State: \_\_\_\_\_  
Dates Attended: from \_\_\_\_\_ to \_\_\_\_\_

Degree Obtained

☐ Yes

☐ No

(If "Yes," type of degree): \_\_\_\_\_

School #2: \_\_\_\_\_  
City, State: \_\_\_\_\_  
Dates Attended: from \_\_\_\_\_ to \_\_\_\_\_

Degree Obtained

☐ Yes

☐ No

(If "Yes," type of degree): \_\_\_\_\_

### Graduate College or University

School: \_\_\_\_\_  
City, State: \_\_\_\_\_  
Dates Attended: from \_\_\_\_\_ to \_\_\_\_\_

Degree Obtained

☐ Yes

☐ No

(If "Yes," type of degree): \_\_\_\_\_

### Technical, Business, or Professional

School: \_\_\_\_\_  
City, State: \_\_\_\_\_  
Dates Attended: from \_\_\_\_\_ to \_\_\_\_\_

Degree Obtained

☐ Yes

☐ No

(If "Yes," type of degree): \_\_\_\_\_

### Professional License

License Number: \_\_\_\_\_  
License Type: \_\_\_\_\_  
State: \_\_\_\_\_

I have read this Notification, Authorization, and Consent to Release of Information and fully understand the terms of this release.

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date*