THE NEW YORK STATE EDUCATION DEPARTMENT High School Equivalency (HSE) Office 89 Washington Avenue, EBA 460 Albany, New York 12234

Application J Form: 24 College Credit High School Equivalency Pathway

Instructions:

- 1. Complete Part A below.
- 2. Provide this completed form to the institution official to complete Part B and verify that the information is accurate.
- 3. The completed form and an official transcript need to be mailed to the NYSED HSE Office at the address listed at the top of the form.
 - Applicant must have been a recognized candidate in a college-level degree or certificate granting program and completed 24 credits, as designated, at a college located within the United States or accredited by a U.S.A. higher education institution.
 - Applicants must have reached Maximum Compulsory School Attendance Age (MCSAA) prior to being awarded a
 High School Equivalency Diploma. A student reaches MCSAA when the school year in which the applicant turns 16
 has ended (June 30th). Please note that school districts may opt to designate age 17 as the MCSAA, pursuant to
 NYS Education Law § 3502(3).

Part A: Document Holder Inform	ation						
First Name		Middle Initial		Last Name		Suffix	
Name at time of Callege Credits as	سے ما (:4 ما:44	want fuana ab		Cavanana ant la	aved ID (a	CCN as Dairea	'a liaanaa\.
Name at time of College Credits ea	rnea (ir aime	erent from abo	ove):	Government is	sued ID (e	ex. SSN or Driver	s license):
Date of Birth (mm/dd/yyyy) Student telephone nu			nber	Email Address (print neatly and clearly)			
Mailing Address (Street/P.O. Box)					Apartment Nu	ımber
C'.			s				
City			State			Zip C	oae
 I certify that I have successfue 2 of the application. I understand that I will not be awarded eligibility and program requirements. Intesting Applicant Signature: 	d a New York :	State High Scho	ool Equival	ency Diploma based	on 24 Coll	ege Credit unless I	meet the I-out-state-
						. caa, c zacc	
Part B: Completed by the Registra	r (Most rece	nt if more th	an one co	illege):			
Name of institution:		City and State of Institution			Registrar's Phone Nu		umber:
Registrar's Name		Dogistro	r's Emaile				
registrar s ivarrie		negistia	r's Email:		۱ ا		,
						Institutio	n's
Registrar's Signature:		Date:			4	Seal o	r
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The certifying College must ret official transcript(s) to the add				orresponding	L		

Last revised: 4/11/2024

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COURSE DISTRIBUTION REQUIREMENTS FOR EARNING A HIGH SCHOOL EQUIVALENCY DIPLOMA

Provide the course name listed on your official college transcript to demonstrate completion of credits in each distribution area. Note that all credits must be from an accredited college or university in the United States.

If you have questions regarding the eligibility of your college, please contact: hse@nysed.gov.

English Language Arts [6 credits]	Mathematics [3 credits]
Course:	Course:
Course:	
Natural Sciences [3 credits] (Computer science does not fulfill this requirement)	Social Sciences [3 credits]
Course:	Course:
Humanities [3 credits]	Any courses within the registered degree or certificate program [6 credits]
Course:	Course:
	Course:

Last revised: 4/11/2024