

# WALLACE STATE HANCEVILLE

## Graduation Verification for Summer Financial Aid (For Current High School Seniors Only) Summer 2026

\_\_\_\_\_  
DATE

\_\_\_\_\_  
STUDENT'S FULL NAME

\_\_\_\_\_  
Student ID

\_\_\_\_\_  
NAME OF HIGH SCHOOL

\_\_\_\_\_  
DIPLOMA TYPE

\_\_\_\_\_  
ACTUAL GRADUATION DATE (2026)

I certify that the above-named student has met all requirements at this time for graduation planned on the above-designated graduation date at our school.

\_\_\_\_\_  
GUIDANCE COUNSELOR'S SIGNATURE

\_\_\_\_\_  
DATE

Students, please return the completed form to the Financial Aid Office:

**Wallace State Community College**  
**Office of Financial Aid**  
**801 Main Street NW**  
**P. O. Box 2000**  
**Hanceville, AL 35077-2000**  
**Phone: 256-352-8255**  
**FAX: 256-352-8122**  
**financialaid@wallacestate.edu**

*Note: This form DOES NOT replace the school requirement for a **final high school transcript showing graduation date.***