

Graduation Verification for Summer Financial Aid (For Current High School Seniors Only) Summer 2025

DATE

STUDENT'S FULL NAME

SOCIAL SECURITY NUMBER/Student ID

NAME OF HIGH SCHOOL

DIPLOMA TYPE

ACTUAL GRADUATION DATE (2024)

I certify that the above named student has met all requirements at this time for graduation planned on the abovedesignated 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 finaid@wallacestate.edu

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