

2020-21 High School Completion Form

Student ID #	
Last Name	
First Name	
Date of Birth (mm/dd/yyyy)	
Telephone #	
Note: Use student's legal name, not	nicknames (i.e. Robert- not Bobby, Bob, Robby, or Rob)
Provide one of the following do college in 2019–2020:	cuments that indicate the student's high school completion status when the student will begin
O I have not graduate	ed from high school yet. I will submit my documentation after graduation.
O A copy of your high	school diploma.
O A copy of your fina	l official high school transcript that shows the date when the diploma was awarded.
O A copy of your Gen	eral Educational Development (GED) certificate or GED transcript.
O An academic transc credit toward a bac	cript that indicates you successfully completed at least a two-year program that is acceptable for full chelor's degree.
O If you completed se similar document.	econdary education in a foreign country, a copy of the "secondary school leaving certificate" or other
	s Only: u to obtain a secondary school completion credential other than a high school diploma or its submit a copy of that credential.
recognized equivalent,	quire you to obtain a secondary school completion credential other than a high school diploma or its submit a transcript or the equivalent, signed by your parent or guardian that lists the secondary apleted. It must also document the successful completion of a secondary school education in a
f you are unable to obtain the documentation above, contact WSC Financial Aid at 701-774-4248.	
Office Use Only	☐ Transcript is already in WSC's System. Employee Name
Oo NOT make changes to the FAFSA	A while in the Verification process.
	our aid, we suggest that you submit this completed form to the address below within 2 weeks. Your the Verification process is complete. Be sure to check your To Do List on Campus Connection for eeded to complete Verification.

I certify the information on this form is true and complete to the best of my knowledge. I understand that purposely giving false or misleading information may result in fines, penalties, and/or reduction or immediate repayment of aid. I understand that the information provided on this form may affect my financial aid eligibility/award.

Date_

Student Signature _____

Note: Unsigned documents will be returned. This form must be signed with a physical signature. Typed names or electronic signatures are not acceptable.

In an effort to protect your sensitive data, please DO NOT submit W-2s or tax forms by fax or general email.

For questions: Email: wsc.financialaid@willistonstate.edu or Phone: (701) 774-4248