



WALLACE STATE HANCEVILLE

Office of Admissions and Registration
PO Box 2000 • Hanceville • AL • 35077-2000
(256)-352-8128 • 1-866-350-WSCC

High School Transcript Request

Name of high school attended _____

Address _____

(City)

(State)

(Zip)

I do hereby request that you release transcripts containing my grades and test scores to Wallace State Community College. Thank you for your time and cooperation.

Print full name as it appears on high school records

Social Security Number

Date of birth

_____ to _____

Dates you attended this institution

Student's Signature

Please mail my transcripts to:

Student's Address

Office of Admissions
Wallace State Community College
PO Box 2000
Hanceville AL 35077

City

State

Zip

Student's Phone

(It is the responsibility of the student to request all educational records from prior institutions)