



## Enrollment Verification Request

In accordance with the "Family Education Rights and Privacy Act of 1974" Public Law 93-380 (Education Amendment of 1974), enrollment verifications cannot be released without a written request and signature from the student, except to certain authorized college officials.

**NOTE:** Please allow **3 - 5 business days** for your request to be processed. Please fill in each section completely. Third party Requests can be fulfilled through the National Student Clearinghouse.

**PLEASE PRINT LEGIBLY:**

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE CHECK ONE:**

- I will pick up my enrollment verification.
- Please mail my enrollment verification to me at the address above.
- Please mail my enrollment verification to the following address:

\_\_\_\_\_  
\_\_\_\_\_

<b>To be completed by staff:</b>
Ready for Pick-Up:
Date: ___/___/___
Time: _____

**Enrollment Verifications already include full/part-time status, dates of attendance, and credit hours. If you require additional information, please check the appropriate box below:**

- GPA
- Program of Study
- Anticipated Graduation Date (You must have a declared major)

Reason for requesting enrollment verification: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_