ENROLLMENT VERIFICATION FORM

INSTRUCTIONS: Please print clearly the information listed below, including the name and address or fax number of the agency to which the verification is to be sent. The student’s signature is required, and electronic signatures are not accepted.

Name: ___________________________________________ Banner ID: ______________________

Any other name(s) under which you were enrolled: __________________________________________

College: ___________________________ Major: ___________________________ Degree: ______

Daytime phone: ______________________ Expected Graduation Date: _______________________

Enrollment for: Year _______ Term: Fall _____ Spring _____ Summer _____

Student signature: ___________________________ Date: ______________________

ENROLLMENT VERIFICATION:
All standard enrollment verification forms issued by this office include the student's current semester enrollment status, expected graduation date for current program of study, college, degree, major, terms attended, and any earned degrees with graduation dates if applicable. If additional information is required, please specify below:

_____ Academic standing
_____ Grade point average
_____ Other—Please specify: __________________________________________________________

______________________________

DEGREE VERIFICATION:
All standard enrollment verification forms issued by this office include earned degrees with graduation dates.

DELIVERY OPTIONS:
_____ Mail    _____ Fax    ____ Pick-Up    Please Note: emailing is not an option

NAME and MAILING ADDRESS or FAX NUMBER of AGENCY:

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