

Request for Enrollment Verification Letter

If you will be submitting this form via email, please include the words "[PC-Encrypt]" in the subject line to ensure that your message is sent securely.

Name: Grad Year: Last four digits of Banner ID #: Purpose of Request: Scholarship Insurance Housing Other: Enrollment Verifications contain directory information (Dates of Attendance, Expected Graduation Date, Term Dates, Program of Study, Credit Hours). Please indicate below if you would like to include any non-directory information in the letter. GPA Home Address Birthday Other: By signing below, I authorize the inclusion of this additional non-directory information in the requested letter. Pick up a printed copy at the Office of the Registrar Pick Up Date: Email electronic copy or mail paper copy of enrollment verification to:	Date:				
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Student Signature (required) :	Student Signatura	(required) ·			