

## REQUEST FOR VERIFICATION OF ENROLLMENT

• **Indicate type of Verification:**

**Verification of Enrollment**

(Available after the ADD/DROP period for a given quarter. Allow seven working days for processing.)

**Verification of Enrollment with Expected Graduation**

(Available after the ADD/DROP period of your last quarter. Allow two working days for processing.)

**Letter of Good Standing**

(Available after your first quarter Evaluations have been processed. Allow seven working days for processing.)

• **Program enrolled:**

BA  Bridge  MAP  MAOM  MPIC  MAE  MFA  USMA

• **Indicate quarter/semester to be verified:**

Current Enrolled Quarter/Semester  ALL Enrolled Quarters/Semesters

• **Student's Name/ID Number (print)** \_\_\_\_\_

\_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone #/email ( \_\_\_\_\_ ) \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address letter/fax to:**

**THIS INFORMATION MUST BE PROVIDED IN ORDER FOR YOUR REQUEST TO BE PROCESSED!!**

Name of Agency/School: \_\_\_\_\_

To whom it may concern: \_\_\_\_\_

Address/City/Zip Code/State: \_\_\_\_\_

10/28/10 DB

<b>Office Use Only:</b>	Date Rec'd _____	By _____	Date Sent _____	By _____
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