



Enrollment Letter Request Form

Office of the Registrar
Recitation Hall, Room 21

Name _____
(Please Print) Last First Middle Initial

Student ID number _____

Campus/Daytime phone _____

What period of time needs verified?

Current Semester ____/____

From ____/____ To ____/____

Next Semester (must be registered)

Enrollment History

Please Choose From The Following:

Please check box if you want to **PICK UP** the certification

FAX: Attn _____ Fax number: () _____

SCAN & EMAIL: Email address: _____

MAIL TO: _____

Address _____

City _____ State ____ Zip _____

Additional information that may be included in the letter:

Social Security Number

Dean's List for chosen semester(s)

Current cumulative GPA

Current course schedule

University Seal

This is actually crimped on the letter

PLEASE NOTE

In keeping compliance with FERPA, the items mentioned above may only be requested by the student.

After reviewing the opposite column, are there any additional comments you need on this letter?

For Seniors ONLY

Letter stating student's *anticipated* degree date

Student Signature _____

Date _____

Office Use ONLY

Processed by: _____

Date processed _____