



### ENROLLMENT VERIFICATION

Please specify the information that needs to be verified and attach any necessary forms (if applicable):

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- I will pick up the letter or form(s) in the Admissions & Records Office.
- Email to: \_\_\_\_\_

Provide the **complete** name and mailing address or fax number.

- Mail to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Fax to: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ J Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I hereby authorize the release of my records.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Required by federal law. We cannot accept typed signatures.**