

# Request for a Letter of Enrollment

Students may request a letter of enrollment for any term in the academic year. The letter includes the student’s name, student identification number, term dates, course registration for the term, expected graduation date, and credit status. It does not include grades. The letter of enrollment is signed by the Registrar. It may be sent directly to third parties or to students in a signed, sealed envelope. There is no charge. Requests for a letter of enrollment ordinarily are processed within a five-day period from the date of receipt; however, it may take longer to process requests during busy periods.

### Instructions for Ordering a Letter of Enrollment

- Print all requested information legibly and in ink.
- Indicate the type(s) of letter(s) requested.
- Provide exact names and complete addresses of recipients where appropriate.
- Sign the form where indicated.
- Submit completed form(s) by mail, fax, or in person to the above address. Telephone and e-mail requests are not accepted.
- Letters of enrollment cannot be emailed.

### Please Provide All Information Requested

Legal name: \_\_\_\_\_  
First
Middle
Last

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal code \_\_\_\_\_ Country (if not US) \_\_\_\_\_

Daytime telephone number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_

Year Select a term:  Fall  Spring  Summer  Intersession

I authorize release of my enrollment information for the specified year and term to the recipient below.

Student signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

### Indicate the Type(s) of Letter(s) of Enrollment Requested

- Official copy sent to the student’s current mailing address in a signed and sealed envelope for forwarding to a third party. Number of copies needed \_\_\_\_\_.
- I prefer to pick up my above letter of enrollment when my letter of enrollment is ready.
- Official copy sent directly to a third party. Print complete name and address of third party recipient below. Complete a separate request for each recipient.

Recipient name: \_\_\_\_\_  
First
Middle
Last

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal code \_\_\_\_\_ Country (if not US) \_\_\_\_\_

Number of copies to be sent to this recipient \_\_\_\_\_