



STUDENT'S REQUEST

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

I.D.#: \_\_\_\_\_ Date of Request: \_\_\_\_\_

I give my permission for the Registrar's Office to provide the information I have requested to the address I have indicated below. (I understand my Social Security Number will be given).

Signature: \_\_\_\_\_

REQUEST FOR:

\_\_\_\_\_ Degree Completion Letter (prior to Degree posting - only)

Degree(s): \_\_\_\_\_

Major(s): \_\_\_\_\_

Date of Completion: \_\_\_\_\_

\_\_\_\_\_ Insurance Letter/Enrollment Letter: (verification through current semester only)

Semester(s): \_\_\_\_\_ Full-Time \_\_\_\_\_ Half-Time \_\_\_\_\_

\_\_\_\_\_ Student Grade Report: (semester) \_\_\_\_\_

\_\_\_\_\_ Other (please explain): \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_ Pick Up: \_\_\_\_\_ (date)

\_\_\_\_\_ Mail To: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_