



Enrollment Certification

First Name (Please Print): _____ Last Name _____

College ID (or Social Security #): _____

Please check the semester and specify year (check only one per request):

<input type="checkbox"/> FALL	Year: _____	<input type="checkbox"/> Winter Mini	Year: _____
<input type="checkbox"/> SPRING	Year: _____	<input type="checkbox"/> Summer Mini	Year: _____

Choose delivery method and provide information accordingly—please allow five to seven business days for processing:

MAIL: _____

FAX: _____

EMAIL: _____

Student's Signature (Required): _____ Date: _____

IMPORTANT: Please note the following:

The Enrollment Certification letter will not be released without the student's signature or if there are any financial obligations or departmental holds. If your enrollment status changes from full-time to part-time, part-time to less than part-time, or you deregister, an updated certification letter will be resent as requested above.