



School Code: 002076
College Code: 5296

Office of the Registrar
ENROLLMENT/DEGREE VERIFICATION

DATE: _____

NAME: _____

ID#: _____

CHECK THE APPROPRIATE VERIFICATION REQUESTED:

CURRENT ENROLLMENT VERIFICATION

____ FALL SEMESTER

____ SPRING SEMESTER

Verification includes:

- *Current semester start and end dates*
- *Expected graduation date*
- *Total semester credits*
- *Enrollment Status*

Undergraduate:

Full Time = 12 or more credits

Halftime = 6-11.5 credits

Part Time = Less than 12 credits

Graduate:

Full Time = 9 credits

3/4 time = 6 credits

Half Time = 3 credits (FT in Summer)

Check here if the following is needed:

____ *Cumulative GPA*

OFFICE USE ONLY:

Semester/Year: _____

Crs: Graduate: _____

Undergraduate: _____

FT/HT/PT: _____

Semester start date: _____

Semester end date: _____

Expected Graduation: _____

If requested:

GPA: _____

Verified by:

Date:

DEGREE VERIFICATION

Name at the time of graduation, if different:

Please Print

____ **GRADUATE DEGREE**

____ **UNDERGRADUATE DEGREE**

Verification includes:

- *Graduation Date*
- *Degree Earned*
- *Major/Program/Concentration*

Additional information to be verified:

(Please check all that apply):

____ *Final GPA*

____ *Rank in class (Undergraduates only)*

OFFICE USE ONLY:

Degree: _____

Awarded: _____

Major/Program/Conc: _____

If requested:

Final GPA: _____

Rank in class: _____

Verified by:

Date:

SEND TO (email or mailing contact and address):

Empty box for mailing contact and address.