

**Request for Verification of Student's Status**

TO: Office of the Registrar

Please furnish information below on identified student:

STUDENT'S NAME:

\_\_\_\_\_

STUDENT'S SSN:

\_\_\_\_\_

- 1.  Currently enrolled as a full-time student.
- Currently enrolled as a half-time student.
- Currently enrolled as more than a half-time student.
- Accepted for enrollment as a half-time student.
- Not currently enrolled.

NOTE: Half-time is whatever the school's definition of "half-time" is OR one half of the number of hours the school requires to be considered a full time student. (Example: If a school requires 12 hours to be full-time, then half-time would be 6 hours).

2. ENROLLED FOR:

- Number of semester hours for current semester, or
- Number of quarter hours for current quarter,

3. Is student maintaining an acceptable school standing?  
 Yes       No       New Student

4. Student's anticipated date of graduation? \_\_\_\_\_

5. Information provided by:

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(School and Telephone Number)