

## Request for Verification Letter

### (1) Complete your personal information.

Name \_\_\_\_\_  
Last First Middle Former Name(s)  
\*Daytime Phone \_\_\_\_\_  
Including Area Code \_\_\_\_\_ University ID number \_\_\_\_\_  
\*Email address \_\_\_\_\_  
Please print \_\_\_\_\_ \*In case we need to contact you with questions about your request

### (2) Indicate method of delivery. You can pick up your verification letter or have it mailed to you.

#### Choose one of the following:

- \_\_\_\_\_ Pick up in 010 Enrollment Services Center (available in 3 working days - allow 4-5 working days during peak processing times).  
Must bring valid Photo ID.
- \_\_\_\_\_ Mail verification to **complete Name and Address** below: (minimum of 3 working days for processing, mailed First Class USPS). **International Address:** Please write full name and address including Country & Postal Code as it should appear on envelope for delivery.

Full Name or Company \_\_\_\_\_  
Attention to, P.O. Box, } \_\_\_\_\_  
Street address, } \_\_\_\_\_  
Apartment number } \_\_\_\_\_  
City, state, country, \_\_\_\_\_  
Zip code \_\_\_\_\_

### (3) Indicate number of copies

\_\_\_\_\_ Number of copies requested

### (4) Check one or more lines/boxes below for the information you need verified. To verify your enrollment status at ISU, you must be registered or enrolled for courses prior to requesting enrollment verification for a specific term. Full-time, part-time, or less-than-half-time status is based on the number of credits in which a student is registered or enrolled.

\_\_\_\_\_ Enrollment for term(s): \_\_\_\_\_ Term/Year (list all semesters to verify)  
 List Courses (only available for currently enrolled semesters)  
 Display Number of Credits (only available for currently enrolled semesters)  
\_\_\_\_\_ Loan Deferment for Term: \_\_\_\_\_ Year: \_\_\_\_\_ Anticipated graduation: \_\_\_\_\_ Circle one: B M PHD  
\_\_\_\_\_ Cumulative Grade Point Average – GPA (only cumulative available. Semester GPAs available through transcript.)  
\_\_\_\_\_ Degree(s) Awarded: Degree(s) \_\_\_\_\_ Year(s) \_\_\_\_\_  
\_\_\_\_\_ Anticipated Degree (provide info for all): Term \_\_\_\_\_ Year \_\_\_\_\_ Bachelor's  Master's  Ph.D.   
\_\_\_\_\_ Good Student Discount (Car Insurance – must have insurance form to attach)  
\_\_\_\_\_ Good Standing  
\_\_\_\_\_ Tuition & Fees (Assessed only for current term - Prior terms: contact Accounts Receivable/0880 Beardshear)  
\_\_\_\_\_ Other information: on lines below, please provide specific information to include such as SSN, UID, schedule with days and times (only available for 2 most recently enrolled semesters), class rank, etc.

### (5) Sign the form. Your original signature is required. Typed name is not accepted.

Student Signature

Today's Date

#### For Office Use Only

Time and date for pick-up: \_\_\_\_\_ Request Taken by: \_\_\_\_\_

ID Checked \_\_\_\_\_ Holds Checked \_\_\_\_\_ Check registration for current and or future terms \_\_\_\_\_