

Request for Verification

Complete all of the following information and submit to Enrollment Services.

Requests are processed within 3-5 business days.

| Today's Date | Student Identification Num | Student Identification Number (SID) | |
|--|--------------------------------------|-------------------------------------|--|
| Last Name | First Name | M.I. | |
| Phone Number | Email | | |
| I would like verification of the following information: Current Enrollment – Specify which quarter(s): | | | |
| Please forward my verification | n to: Recipient | | |
| SELECT ONE OF THE FOLLOW | ING: □ Email □ Mail □ Fax □ Hold for | pick up at Enrollment Services | |
| Recipients Info: | | | |
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I hereby certify that to the best of my knowledge, all statements are true and I understand this process can take up to five (5) business days.

Student Signature

SVC provides a drug free environment and does not discriminate on the basis of race, color, religion, national origin, sex, gender identity, sexual orientation, disability, marital status, or age in its programs and employment.