



REQUEST FOR VERIFICATION OF ENROLLMENT

IMPORTANT: Mount Saint Mary's University cannot verify enrollment for any term prior to the beginning date of that term. Verification will only be made for current or previous terms. Allow one business day for processing. The Request for Verification of Enrollment can be submitted via email (registrar@msmu.edu), fax, mail, or in-person but the completed paperwork **cannot** be emailed back.

Last name: _____ First: _____ MSMU ID#: _____

Email: _____ Phone #: _____ D.O.B.: _____

Degree: (circle one) AA/AS BA/BS GR CERT Anticipated Grad Date: _____

Requesting verification for: Fall _____ Spring _____ Summer _____

This verification is intended for: _____

Form attached Letter: { } Cross-Registered { } Enrollment History { } Ant Grad Date { } Degree(s) Earned
{ } Other: _____

Delivery Method:

I will pick up verification: { } Doheny Campus { } Chalon Campus
(Note: this option will require a picture ID)

I authorize _____ to pick up on my behalf.
(Note: this option will require a picture ID)

Please fax verification to: _____

Please mail verification to: _____
Recipient's Name/Agency

Street Address

City

State

Zip

I certify that I am the above person and the information I have provided is accurate.

Signature: _____

Date: _____

(Physical signature only - no font or electronic signature)

*****Registrar's Office Use Only*****

The Registrar's Office has released this information in accordance with the Family Education Right and Privacy Act of 1974. This information cannot be released to another party without the written consent of the student.

Processed by: _____ date _____

form revised 8/7/2019