



PRINT NAME									
BERG I.D. NUMBER									
SOCIAL SECURITY NUMBER									
EXPECTED GRADUATION									

ENROLLMENT VERIFICATION

Please Print Clearly

In compliance with federal law, Muhlenberg's student information release policy permits the release of personally identifiable information from a student's education record only with the written consent of the student. **The student, and that student only, is the person with release rights to their records.**

VERIFY THE FOLLOWING INFORMATION:

<input type="checkbox"/> Enrollment Status (full-time, part-time) <input type="checkbox"/> Current Semester Dates <input type="checkbox"/> Dates of Attendance <input type="checkbox"/> Expected Date of Graduation <input type="checkbox"/> Field of Study <input type="checkbox"/> Class Rank <input type="checkbox"/> Grade Point Average	<input type="checkbox"/> Other: _____ PLEASE SPECIFY _____ _____ _____ _____
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DELIVER TO:

Verification delivery via:

Mail Pick up
 Fax
 Scan to email

MAILING ADDRESS

NAME OR ORGANIZATION		
ADDRESS		
CITY	STATE	ZIP CODE

FAX INFORMATION

RECIPIENT	FAX NUMBER
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EMAIL INFORMATION

RECIPIENT	EMAIL ADDRESS
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STUDENT SIGNATURE DATE