

Registrar's Office Enrollment Verification Request

Enrollment verification letters confirm that a student is or was enrolled at Providence. Verification letters are printed on Providence letterhead, signed by the Registrar, and embossed with the Providence College seal. Enrollment Verifications contain: Full Name, Status (full time/part time), Major/Concentration, Populi ID#, Term Dates, and Program Length.

Telephone requests are NOT accepted and the College does NOT fax enrollment verification requests. Enrollment Verification orders will NOT be processed until all financial holds are cleared. One request per academic year is free; additional requests are \$3. Allow 2-3 days for processing.

Name:				
Last		First	Middle Initial	
Date of Birth://	_			
Current term of attendance OR last term	n of attenda	nce:		
Fall / Spring of 20 [ex. Fa	ıll /Spring of 20	16]		
Please indicate if any of the additional in	nformation	is required:		
o Past Attendance o Degree Co	onferred	o Cumulative Reside	o Cumulative Residential GPA	
o Non-Attendance o Social Sect	urity Numbe	er [Verifications containing SSN can	not be emailed]	
O Other:				
Please indicate the delivery method for y O I will pick up my completed verification,	•			
O I authorize	•	·	1. [Photo ID required]	
O Email my verification to:				
O Mail my verification. [USPS First Class Mail Onl	ly]			
Mail Verification to:				
	Name / Orga	nization		
	Street			
	City	State	Zip	
By signing below, I request and release the a verifying my current/past/non enrollment a		1 7	ne purpose of	
C. 1 . C		Date:/	_/	
Student Signature (required)				