

Current students: for basic requests requiring student status for current term, please use the National Student Clearinghouse link located in Murphy. You do not need to complete this form.

(This form may be completed online. Press tab to advance, then print and sign.)

ENROLLMENT VERIFICATION REQUEST

Requests without complete information will NOT be processed.

Student Name: _____

UST ID/SS: _____ Daytime Phone #: _____

TERMS TO BE VERIFIED: Fall _____ Spring _____ Summer _____

ACADEMIC YEAR TO BE VERIFIED: 20____-20____

SELECT THE INFORMATION TO BE VERIFIED FROM THE ITEMS BELOW:

- () Enrollment Status (Full-time, Half-time, etc.)
- () Number of Credits
- () Anticipated Graduation Date
- () Degree Program
- () Other _____

DELIVERY METHOD:

- () I will pick up letter at front desk.
Please allow 2 days to process your request. Letters for pick-up will be held for 2 weeks.

- () Mail letter to address below:

Person/Organization: _____

Address Line 1: _____

Address Line 2: _____

City, State, Zip: _____

- () Fax letter to:

Name: _____ Organization: _____

Fax Number: () _____

Student Signature: _____ Date: _____

PLEASE SUBMIT FORM TO: Registrar's Office, Mail AQU 106, University of St. Thomas,
2115 Summit Ave, St. Paul, MN 55105
Fax: 651-962-6710

**** Enrollment for future terms cannot be verified until the first day of that term. ****