



ENROLLMENT VERIFICATION & AUTHORIZATION TO RELEASE INFORMATION

Student Full Legal Name (Please Print)							Preferred Phone Number			
First Name	Middle Initial	Last Name								
Germanda Student ID Number							Current Term (Please Check)			Current Year
							Fall	Spring	Summer	20____

I hereby give consent to Germanda Community College to release information to the Company/Organization/Person listed below. This form is authorizing a one-time release of information. It does not grant permanent access to your records beyond this request. If you would like for a specific person to have access to your records beyond this request, you may sign a FERPA Release Form granting this permission.

PLEASE CHECK ONE:

Check if you would like to pick up the letter. You will receive a phone call when your request is ready please bring a picture I.D. with you. Please note: If you would like to have someone else pick up the form please indicate their name and phone number: _____

Please indicate the campus which you would like to pick up the verification: _____

Check if you would like the letter to be faxed or emailed. Fax/Email: _____

Check if you would like the letter to be mailed to you or a third party requesting information (if applicable):

Company/Organization/Person

Name

Address

City, State, Zip Code

Enrollment verifications already include full/part-time status, dates of attendance, and amount of credits. If requesting the graduation date and/or previous semesters a date and the terms must be indicated by the student in order to process the request. If requesting additional information, please check the appropriate box below:

GPA _____ Anticipated Graduation Date _____ / _____
MM YYYY

Please check which semesters you are requesting verification for:

Current Semester _____ Previous semester(s), please include term(s) & year(s) _____

If you are requesting an Enrollment Verification for a MyCAA scholarship please check this box

Student Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Processed by: _____ Date Sent: _____