



# Verification of Enrollment Request (Telecommuting Version)

Student Name: \_\_\_\_\_  
Last First Middle

ctcLink ID Number: \_\_\_\_\_ Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (MM-DD-YYYY)

Student Email: \_\_\_\_\_

INDICATE YEAR AND QUARTER TO BE VERIFIED: YEAR: \_\_\_\_\_

- Summer
- Fall
- Winter
- Spring

Check type of verification needed: (ONLY check what you need included in your letter)

- Enrollment Status:
  - Current quarter; Number of credits registered
  - Upcoming quarter—ONLY if registration has started
  - Previous quarter
- GPA
  - Number of credits completed
  - Good Student Discount
  - Unemployment Progress Report

Other: (please be specific) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Request cannot be processed without student's signature.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

INDICATE WHERE THE COMPLETED VERIFICATION LETTER/FORM SHOULD BE SENT  
(We do NOT FAX!):

SCAN and EMAIL TO: \_\_\_\_\_  
(Email address)

MAIL TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_