

## ENROLLMENT VERIFICATION

Please print clearly and fill in all portions of the form. Any question or comments please email us at [ENROLLMENTVERIFICATION@Baruch.cuny.edu](mailto:ENROLLMENTVERIFICATION@Baruch.cuny.edu)

### STUDENT INFORMATION

\_\_\_\_\_ or XXX—XX—  
 EMPLID (CUNYFirst ID) Last four digits SSN Date of Birth

Name: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Name while attending (if different) \_\_\_\_\_

Current Street Address \_\_\_\_\_ Day Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email Address \_\_\_\_\_

Are you currently enrolled?  No  Yes Graduated?  No  If Yes, Degree and Date: \_\_\_\_\_

### APPLICATION PROCESSING

Please check which letter(s) you are requesting below:

- Current Enrollment** Includes your major, credits in progress, credits completed and semester start date.
- Semesters Enrolled** Includes semesters of enrollment, enrollment status and start and end dates for each semester.  
Indicate Semester(s): \_\_\_\_\_
- Graduation Letter** Includes the degree awarded, major and graduation date.

Would you like to have your expected graduation date reflected in the letter?  No  If Yes, expected Graduation Date: \_\_\_\_\_

Additional Comments (optional): \_\_\_\_\_

Would you like to have your address reflected in the letter?  No  Yes

Quantity <input style="width: 30px; height: 20px;" type="text"/> Please choose: <input type="checkbox"/> Email/Mail <small>circle one</small> <input type="checkbox"/> Pick up	<b>If mailing please print name and address of recipient.</b> _____ _____ _____ _____
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**Enrollment verifications are processed in 2-3 business days of receipt.**  
**Requests will not be processed unless all financial and other obligations to the college are met.**  
**Your signature is required to authorize the issuance of the certification of attendance letter.**

\_\_\_\_\_  
 Student's Signature Date

<b>OFFICE USE ONLY</b>							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">PROCESSED BY</td> <td style="padding: 2px;">Comments: _____</td> </tr> <tr> <td style="padding: 2px;">INITIAL:</td> <td style="padding: 2px;">_____</td> </tr> <tr> <td style="padding: 2px;">DATE:</td> <td style="padding: 2px;">_____</td> </tr> </table>	PROCESSED BY	Comments: _____	INITIAL:	_____	DATE:	_____	_____ _____
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