ENROLLMENT VERIFICATION REQUEST
Arizona State University
(To be completed by the student)

First Name: ____________________________ Last Name: ____________________________

ASU ID: (10 digit number): ____________________________

Phone: ____________________________ Email: ____________________________

TERMS TO BE VERIFIED:
☐ All Terms Attended  ☐ Specific Term(s): [ex.]  Fall  2015

Begin: Term: ______ Year: ____________________________
End: Term: ______ Year: ____________________________

INCLUDE THE FOLLOWING INFORMATION: (check all that apply)
Note: Current Program (Major) and Earned Degrees are automatically included.

☐ Cumulative / Term GPA  ☐ Expected Graduation Date (Specify): ___________ ☐ Social Security Number
☐ Verification of Online/Hybrid Courses (This request may take up to one extra processing day)
☐ Other (Specify) ____________________________

SPECIAL REQUESTS: Please COMPLETE student portion prior to submission and include all necessary documentation. Requests are completed contingent on full information being provided.

*If choosing an option below, Expected Graduation Date must be filled in above

☐ Alaska PFD Verification  ☐ Canadian Tax Form
☐ Foreign Educational Forms  ☐ Marine Corps Certification  ☐ Other ____________________________

ONCE COMPLETED I REQUEST THE VERIFICATION IS:

☐ Sent To Email Indicated ____________________________
☐ Sent To Fax Number Indicated ____________________________
☐ Sent To Address Indicated ____________________________
☐ Available To Be Picked Up At Registration Location Indicated ____________________________

( Photo ID is required for pick up. )

Please allow University Registrar Services 2 business days for processing.

You will be notified by email if we are unable to complete the verification.

By signing below, I authorize ASU to release the information I have designated to the parties I have specified.

Student Signature: ____________________________ Date: ____________________________

Downtown Phoenix campus
University Center Bldg - 130
University Registrar Services
411 N. Central
Phoenix, AZ 85004
602-496-4372
Fax: 602-496-0376
Email: registrar@asu.edu

Polytechnic campus
Administration Building
University Registrar Services
5990 S. Sterling Mall.
Mesa, AZ 85212
480-727-1142
Fax: 480-727-1008
Email: registrar@asu.edu

Tempe campus
Student Services Building—Rm. 140
University Registrar Services
PO Box 870312
Tempe, AZ 85287
480-965-3124
Fax: 480-965-7722
Email: registrar@asu.edu

West campus
University Services Building - Rm 120
University Registrar Services
PO Box 37100
Phoenix, AZ 85069
602-543-8203
Fax: 602-543-8312
Email: registrar@asu.edu

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