



VERIFICATION LETTER REQUEST FORM

Your active enrollment will not be verified until you have made payment arrangements. Please allow 5 business days to process this request.

Please print clearly:

Name: _____
Last Name First Name Middle Name

Name at the time of enrollment (if different from above): _____

Last four digits of Social Security#: _____ **Date of Birth:** _____
Month/Day/Year

Phone#: _____ **Email:** _____

Address: _____
Street City State Zip Code

Division (please select): ☐ Career/Technical ☐ Apprenticeship ☐ ESL/CRESL

Program Name: _____

Year(s) that you attended: _____ **Student ID# (Optional):** _____

Verification Type:

☐ Enrollment Verification ☐ Letter of Non-Enrollment ☐ Attached Third Party Form

Delivery Method (please select):

☐ Address above
☐ Address below
☐ I will pick-up at the Welcome desk* (email sent when ready for pick up)
☐ Email

Name and/or Institution

Street City State Zip Code

By signing below, I authorize Emily Griffith Technical College to release my enrollment information by the delivery method indicated above.

Signature: _____ **Date:** _____

**You will be required to present your student ID card when picking up documents from the welcome desk. If sending a third party to pick up on your behalf, please submit an Authorization for Release of Records form (available at the Welcome Desk, through the [link](#), or on our Student Records page) prior to their arrival.*