



ENROLLMENT VERIFICATION REQUEST FORM

STUDENT INFORMATION

RED ID: _____ OR SSN# _____ - _____ - _____

Student Name: _____

Maiden/Former Name (if applicable): _____

Daytime Phone #: _____ Email Address: _____

Date of Birth: ____/____/____

Estimated Dates of Attendance (ie: August 2008 - August 2011): _____

VERIFICATION INFORMATION

- Verification of enrollment
Letter of Non-Attendance (never attended CES or SDSU)
Letter of Intent to Enroll (desire to enroll in Open University for a specific term/units)
Complete the attached inquiry form

Notes:

INSTRUCTIONS

Check the appropriate box. Note: Due to university security policy we do not e-mail verifications.

Fax to: _____

Attention: _____

Mail to the following address: _____

Student's signature: _____ Date: _____

For Office Use: Date Received: _____ Date mailed: _____ Date faxed: _____