

\*Please email completed form to admissions@tsc.edu

## **Request for Verification of Enrollment**

NAME: (Please print)		_ DOB :	TSC ID:	
PHONE Home:()	Cell:(	) -		
E-MAIL:		<u> </u>		
OTHER NAMES WHICH MAY APPR				
I authorized		to request a	n enrollment verification letter.	
I have notified the 3rd party listed above	e this request will not be	honored without	nis/her photo identification.	
(Please	e select option that a	pplies to your	request)	
I am requesting a Verification I	Letter of my Current Sem	ester	(Example: 2013/FA)	
Note: This request will not be prod	cessed until after the Offici	al Record Date:	//	
I am requesting a Verification	Letter of my status for a s	specific semester	attended:	
Term(s) or Year(s) Please verify	y:		(Example: 2014/FA)	
I am requesting a Verification (Example: AAS 12/2013)	Letter of my Degree(s) awa	arded:		
I am requesting a Verification (Example: 2014/FA thru 2015/SP)		semester attended a	t TSC:	
I am requesting a Verification L (Example: Freshmen)	etter of my Student classific	eation	Completed Hours	
I am requesting a Verification	Letter to verify that I applic	ed, but never attend	led any semester at TSC.	
Please <b>MAIL</b> my verification to the	e following address:			
Please <b>FAX</b> my verification to:		ATTN:		
Please have my verification ready	for SELF PICK-UP	Please <b>EMAIL</b>	to	
STUDENT SIGNATURE:			DATE:	
OFFICE OF ADMISSIONS USE O	NLY			
Received by:			DATE:	

Revised: 03/04/2020