



NORTHSHORE
TECHNICAL COMMUNITY COLLEGE

ENROLLMENT VERIFICATION REQUEST

Campus Enrollment Verification for a current semester will be provided to students after the official census date of the current semester only. Campus Enrollment Verification will not be provided for future enrollment intentions.

Name: _____ **Student I.D. No.** _____

Campus: _____ **Number of copies needed:** _____

The Standard Enrollment Verification letter includes:

- The current and/or most recent semester enrolled
- Semester dates
- The number of credit hours of enrollment

Please detail any additional items you would like included: _____

In the section below, please provide the campus with details necessary to complete the Enrollment Verification Process:

Form provided for completion and school signature.

PLEASE MAIL FORM: (Complete address required. Please Print)

Name: _____

Address: _____

City: _____ **State:** Louisiana **Zip:** _____

PLEASE FORWARD VIA FACSIMILE: (Fax Number required. Please Print)

Contact Name: _____ **Phone No.:** _____

Company Name: _____ **Fax No.:** _____

STUDENT TO PICK UP (Please allow 3 business days)

To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, a college or university must obtain signed authorization before it can release student information.

Student Signature: _____ **Date:** _____

For Office Use Only

Processed By: _____ **Date Completed:** _____