# ENROLLMENT/DEGREE VERIFICATION REQUEST

Office of the Registrar  
First Floor, Mitchell Building  
College Park, MD 20742  
Fax: 301.314.9568

PLEASE NOTE: In order to ensure timely and accurate processing of your request, please complete all sections of this form. For your convenience, students enrolled since 1972 may request verifications online at www.registrar.umd.edu.

<table>
<thead>
<tr>
<th>STUDENT IDENTIFICATION # (UID OR SSN)</th>
<th>DATE OF BIRTH (MMDDYY)</th>
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SELECT THE TYPE OF VERIFICATION YOU WISH TO REQUEST:

- [ ] Degree without GPA
- [ ] Degree with GPA (REQUIRES STUDENT SIGNATURE)
- [ ] Degree with GPA and Class Rank (REQUIRES STUDENT SIGNATURE)
- [ ] Enrollment without GPA
- [ ] Enrollment with GPA (REQUIRES STUDENT SIGNATURE)
- [ ] Enrollment and Degree without GPA
- [ ] Enrollment and Degree with GPA (REQUIRES STUDENT SIGNATURE)
- [ ] Enrollment and Degree with GPA and Class Rank (REQUIRES STUDENT SIGNATURE)
- [ ] Semester Enrollment without GPA

Specify term and year to verify: ________________

- [ ] Semester Enrollment with GPA (REQUIRES STUDENT SIGNATURE)

Specify term and year to verify: ________________

- [ ] Student Schedule (REQUIRES STUDENT SIGNATURE)

STUDENT SIGNATURE  
X

TODAY’S DATE:  

______________________________

DEADLINE (IF ANY):  

______________________________

Requests are processed in the order of receipt. If there is a deadline, every attempt will be made to meet the request, however, the University cannot guarantee that a deadline will be met.

EXPECTED DATE OF GRADUATION:  

______________________________

Good Student Discount Verifications for insurance purposes will require verification of GPA and therefore must be authorized with the student’s signature.

COMPLETE MAILING OR E-MAIL ADDRESS OF VERIFICATION DESTINATION:  
Please print clearly. You are responsible for complete and legible information.

- [ ] This request should not be processed until:
  - [ ] Current semester grades have posted
  - [ ] Degree has posted