



Enrollment/Degree Verification Form

Name (print): _____ Date: _____
Last First Middle

Student ID: _____

Enrollment Verification:

PLEASE CERTIFY THAT: (Check One)

_____ I am enrolled as a full-time student at MSU _____ Term _____

_____ I am enrolled as a part-time student at MSU _____ Term _____

_____ (Other) _____

_____ Enrollment Previous Term(s) _____

Degree Verification:

PLEASE CERTIFY THAT: (Check One)

_____ I will complete my degree _____ Term _____

_____ I have completed my degree _____ Term _____

DELIVERY METHOD: (Check One)

_____ MAIL TO:

_____ HOLD FOR PICK UP:

(Please allow three working days)

*Student's Signature

Local Address

Telephone

*THIS FORM MUST BE SIGNED