UAS UNIVERSITY OF ALASKA SOUTHEAST

ENROLLMENT VERIFICATION REQUEST

JNACC | 08.14.09

JUNEAU CAMPUS
REGISTRAR'S OFFICE
11120 GLACIER HWY.
JUNEAU, AK 99801
TEL: (907) 796-6100
FAX: (907) 796-6365

KETCHIKAN CAMPUS
STUDENT SERVICES
2600 7TH AVE.
KETCHIKAN, AK 99901
TEL: (907) 225-6177
FAX: (907) 225-3624

SITKA CAMPUS
STUDENT SERVICES
1332 SEWARD AVE.
SITKA, AK 99835
TEL: (907) 747-6653
FAX: (800) 478-3552

full legal name last first middle initial

social security number **date of birth**

current mailing address street or p.o. box city state zip code

phone **e-mail** *(Correspondence to current students is sent to student e-mail account.)*

✖

student signature **date**

Date of Enrollment

Select the semester for which you are requesting verification.
If not specified, current semester will be verified.

[ ] Spring Semester 20 _____

[ ] Summer Semester 20 _____

[ ] Fall Semester 20 _____

Please Note: Audited courses, professional development, and Continuing Education Units (CEU's) are not included in the computation of study load for full-time or part-time status. It is the student's responsibility to notify the receiving agency of any add/drop transactions completed after the enrollment certification has been prepared. If more than (3) semesters of enrollment need to be certified, please request a copy of your official transcript rather than an Enrollment Verification. Students must be officially registered in the semester to be certified.

METHOD OF PAYMENT

[ ] 1-3 Business Days: FREE

[ ] Rush Fee: $10.00

[ ] Cash

[ ] Check (No. _____)

[ ] Mastercard

[ ] Visa

credit card number **exp. date** *(month/year)*

Send verification to:

Send verification to: