



**For insurance, financial, legal, etc. reporting purposes:**

- Enrollment Status
- Class Schedule
- Good Student Insurance Discount
- Scholarship Application
- Admissions Application
- Miscellaneous Certifications

Please clearly print all information.

Student Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Anticipated Graduation Date: JAN MAY SUM DEC 20 \_\_\_\_ Year Entered Taylor/Catalog Year: \_\_\_\_\_

Major(s): \_\_\_\_\_ Degree: BA BS Other: \_\_\_\_\_

*By signing this request form, I authorize Taylor University to release my student information as directed below.*

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Verification—Certification Request**

*Check all that apply.*

Enrollment Verification for:  Fall 20 \_\_\_\_  Interterm 20 \_\_\_\_  Spring 20 \_\_\_\_  Summer 20 \_\_\_\_

Include Current Class Schedule

Include Special Information: \_\_\_\_\_

Certify and Sign Attached Form

Prepare Letter Regarding:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Handling**

*Check all that apply.*

**Mail to:** \_\_\_\_\_

**Hold for Pick Up**

Organization: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**FAX to #:** \_\_\_\_\_

Name/Attention: \_\_\_\_\_

Organization: \_\_\_\_\_

**E-Mail to:** \_\_\_\_\_

Name/Attention: \_\_\_\_\_

Organization: \_\_\_\_\_