



Enrollment Verification Request

Submit completed form by email to MJCESeForms@mjc.edu, in-person, fax, or mail to Enrollment Services. Electronically signed forms will ONLY be processed when using your MJC Student Email.

The first two verification requests are FREE (expedited processing excluded). There will be a charge for subsequent verification requests. For expedited processing you can choose same day or two business day. See the MJC website for pricing or ask an Enrollment Services staff member. When submitting this form using a personal email, Signature MUST BE COMPLETED IN BLUE OR BLACK INK. Verification Requests will be processed within 5-7 business days from receipt of request. Verifications not picked up within 60 days will be discarded!

Please Note: Your enrollment verification will be based on the number of units you are enrolled in when Enrollment Services processes this request. Adding and/or dropping classes between the time of this request and the actual processing date may affect the number of units reported on this verification.

Today's Date: _____

Student Information:

First Name: _____ Middle Initial: _____ Last Name: _____

Student ID: *w* _____ Birthdate: _____ Phone: _____

Information to be Verified:

- Enrollment Status - Semester/ Year to be verified: _____
- Grade Point Average - Cumulative (unless otherwise stated)
- Academic Program/Declared Major
- Vehicle Insurance - Must be full-time, includes current enrollment and a minimum GPA of 3.0 for the previous semester.
- Other: _____

Check Only One Box for Type of Delivery:

- Send to my MJC student email account
- Mail to address listed below
- Pick up in Enrollment Services Office
** Please bring your photo ID to pick up verification*

Name (Company or Self): _____

**If you would like someone else to pickup your verification please write their name below:*

Attention To: _____

Note: Person listed above must bring valid photo ID and a written letter signed by you in order to pickup your request.

Mailing Address: _____

By signing below I understand I am giving consent for MJC to send my verification status to the information I listed or I must pick up the verification in-person in the Enrollment Services Office and must bring a valid picture ID and have a zero dollar balance.

Student Signature: _____ **Date:** _____

| OFFICE USE ONLY | | | |
|--------------------------|-----------------------|-------------------------------------|--------------------------------------|
| Posted By: _____ | Posted Date: _____ | <input type="checkbox"/> First Free | <input type="checkbox"/> Second Free |
| | | <input type="checkbox"/> RQSS | |
| Processed By: _____ | Processed Date: _____ | Amount Owed: _____ | <input type="checkbox"/> Paid |
| Comments: _____ | | | |
| Student Signature: _____ | | Date Picked Up: _____ | |
| Staff Initials: _____ | Date: _____ | <input type="checkbox"/> Mailed | <input type="checkbox"/> Emailed |

05/2019_SJB