

VERIFICATION OF ENROLLMENT INFORMATION

Verifications of Enrollment are provided as follows:

_____ **Mailed** if you provide a self-addressed, stamped envelope with your request.

_____ **Picked up** between five to ten working days after the date you submitted it. Identification will be required. If not picked up within thirty (30) days, your verification will be destroyed, and you will need to resubmit.

_____ **Notified by courtesy call:** This is an automated system that will attempt a call 3 times. If your phone number is incorrect in our system, you will not receive this call. It is your responsibility to update your address and phone number as necessary. Phones with long greetings may not receive the entire message. Phones that refuse computerized calls will reject the courtesy call.

Verifications will be processed at the end of the Late Registration and Adjustment Period. (Refer to the Registration Calendar on our website, www.deltacollege.edu, for specific dates.) *Please note: This does not apply to Loan Deferrals.*

VERIFICATION OF ENROLLMENT FORM

PRINT INFORMATION CLEARLY

SOCIAL SECURITY# _____

STUDENT'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

SIGNATURE: _____ DATE: _____

MAIL TO: _____

SEMESTER/YEAR BEING REQUESTED: FALL _____ SPRING _____ SUMMER _____ YEAR _____

PURPOSE OF REQUEST: MEDICAL/DENTAL INSURANCE _____
LOAN DEFERMENT _____ SCHOLARSHIP _____ CHILDCARE _____
GOOD STD. INSURANCE _____ NON-ENROLLMENT _____
ACCEPTANCE LTR. _____ OTHER _____

For official use only

Verification Fee \$ _____

Received by: _____ Date _____