



ADLER UNIVERSITY

Vancouver Campus

ENROLLMENT AND DEGREE VERIFICATION FORM

** PLEASE PRINT LEGIBLY AND COMPLETE THE ENTIRE FORM * INCOMPLETE FORMS WILL BE RETURNED **

SECTION 1: PERSONAL INFORMATION

First Name: _____ Last Name: _____
 SSN# or Student ID: _____ Program: _____
 Mailing Address: _____
 City: _____ Province/State: _____ Zip/Postal Code: _____
 Daytime Phone: _____ Email Address: _____
 Dates of Attendance: _____ Degree: _____
 Anticipated Graduation Date (if applicable): _____ Graduation Date (if applicable): _____

SECTION 2: CHECK ALL THAT APPLY TO YOUR REQUEST

- Verification of Enrollment
- Verification of Good Standing
- Verification of Degree
- Verification of GPA
- Verification of Status (Full-time/Part-time)
- Fill out the form(s) attached
- Include an Official Transcript (\$10.00 fee and please include a Transcript Request Form)
- Special Instructions: _____

Section 3: DELIVERY INFORMATION

- Mail _____ copies of the requested document to the address indicated above.
- Email the requested document to: _____.
- Fax the requested document to: _____.
- Student Pick-up (12th Floor) when the document requested is ready.
- Please send _____ copies of the document requested to the address below:

Name/Company: _____
 Mailing Address: _____
 City: _____ Province/State: _____ Zip/Postal Code: _____

SECTION 4: NOTIFICATION INFORMATION

- Email me when the document requested is ready. Email: _____.
- Call me when the document requested is ready. Phone: _____.

Signature: _____ Date: _____

**If returning request by mail, send to: Adler University
 Attention: Registrar's Office
 520 Seymour Street, Vancouver, BC V6B 3J5**

IMPORTANT: Please allow 5 business days for processing. If you have any questions regarding the status of your request, please email our office at msousa@adler.edu.