

**Request for Letter of Impending
Graduation or
Verification of Degree Completion**

STUDENT NAME: _____ STUDENT #: _____

DEGREE: _____ COMPLETION TERM: _____

- Verification of Degree Completion Letter of Impending Graduation

This letter should be (choose one of the following):

- Mailed Faxed Picked Up

ADDRESS: _____

FAX
NUMBER: _____

PHONE
NUMBER: _____

DATE
REQUIRED: _____

(Please allow 3-5 days for processing.)

COMMENTS: _____

STUDENT SIGNATURE: _____ DATE: _____