Complete all items. Please PRINT legibly See reverse side for important information/instructions. Name Social Security Number Last Address Number and Street Citv State Email Address Contact Phone\_\_\_\_ Other Name used on records (ex: maiden name)

Date of Birth Semester and Year requested Graduate Student Undergraduate Student This is the only certification requested for the above listed semester Yes No Check Scholarship Type: SACM|Saudi Arabian Cultural Mission \_\_\_\_ Kuwait \_\_\_ Othetiame)\_\_\_\_ Indicate what information needs to be verified: Change of Major \_\_\_\_Extension/Modification \_\_\_Online/Hybrid Classesoursex Term \_\_\_\_ Other (list) Mail Certification(s) to: Recipient/Institution: Address City \_\_ <u>Sta</u>te Zip Student is responsible for correct address. A certification will be mailed to the address indicated. However, if it does not reach its destination, a replacement certification is not free Student's Signature Date All requests mailed or emailed musteiadalde appy of a government-issued photo ID.

Option.:S ( Opti0001 09\_)5.4 (\_\_0OCm ( )5M991 0 0 10.98 374.9 sgu002174 (. 5Pe,5\_\_\_)5[( les fai)Each R

\$12.00

Costs

Certification (BRTN)

## **Certification Ordering**

The Office of the Registrar can certify enrollment, regist**grtidu**ation status and academic standing for current s**aundealis**mni. We can also process deferments for school loans.

SACM or Kuwait requests are generally completed within 7rfess bulsiys but may take lordsperending on the nature of the usest (course descriptions, notarization,). Requests may also take longer during especially busy times of the year issictwas wheelfs of the semester and the periodic busing spring commencement.

A readable copy of the student's government-issued photo idefitation such as WSU ID, driver's license or passport must