

## Request for Certification Letter

Office of the Registrar  
214 Enrollment Services Center  
Ames, IA 50011-2011  
E-mail: [certifications@iastate.edu](mailto:certifications@iastate.edu)  
Phone 515-294-1840 Fax: 515-294-1088

### 1 Complete your personal information.

Name

*Last*

*First*

*Middle*

*Former Name(s)*

\*Daytime Phone including area code \_\_\_\_\_ University ID number \_\_\_\_\_

\*E-mail address please print \_\_\_\_\_ *\*In case we need to contact you with questions about your request.*

### 2 Indicate method of delivery and number of copies. You can pick up your certification letter or have it mailed to you.

\_\_\_\_\_ Number of copies requested

Choose one of the following:

\_\_\_\_ Pick up in 214 Enrollment Services Center (available in 3 working days)

\_\_\_\_ Mail certification to **complete Name and Address** below: (minimum of 3 working days for processing, mailed First Class USPS).  
**International Address:** Please write full name and address including Country & Postal Code as it should appear on envelope for delivery.

Full Name or Company \_\_\_\_\_  
Attention to, P.O. Box, } \_\_\_\_\_  
Street address, } \_\_\_\_\_  
Apartment number } \_\_\_\_\_  
City, state, country, } \_\_\_\_\_  
zip code } \_\_\_\_\_

### 3 Check one or more lines/boxes below for the information you need verified. To verify your enrollment status at ISU, you must be registered or enrolled for courses prior to requesting enrollment verification for a specific term. Full-time, part-time, or less-than-half-time status is based on the number of credits in which a student is registered or enrolled.

\_\_\_\_ Enrollment for term(s): \_\_\_\_\_ Term/Year (list all semesters to verify)

- List Courses (only available for currently enrolled semesters)  
 Display Number of Credits (only available for currently enrolled semesters)  
 Full Schedule with Days and Times (only available for 2 most recently enrolled semesters)

\_\_\_\_ Good Student Discount (Car Insurance – must have insurance form to attach)

\_\_\_\_ Loan Deferment (letter will be attached to Deferment Form provided by student)

\_\_\_\_ Good Standing

\_\_\_\_ Anticipated Degree: Term \_\_\_\_\_ Year \_\_\_\_\_  Bachelor's  Master's  Ph.D.

\_\_\_\_ Degree(s) Awarded: Degree(s) \_\_\_\_\_ Year(s) \_\_\_\_\_

\_\_\_\_ Cumulative Grade Point Average – GPA (only cumulative available. Semester GPAs available through transcript.)

\_\_\_\_ Other information: on lines below, please provide specific information to include such as SSN, UID, class rank, tuition and fees assessed.

### 4 Sign the form. Your original signature is required. Typed or scanned images are not accepted.

Student Signature

Today's Date

#### For Office Use Only

Time and date for pick-up: \_\_\_\_\_ Request Taken by: \_\_\_\_\_

ID Checked \_\_\_\_\_ Holds Checked \_\_\_\_\_ \*\*Check registration for current and or future terms \_\_\_\_\_