

# VERIFICATION REQUEST

LAST NAME		FIRST NAME	STUDENT ID #
Email Address			Phone
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (mm/dd/yyyy)		Country of Citizenship

**Division:**  Undergraduate  Graduate  ACTS Seminary

**Degree/Major**

**Verify Enrolment for Semester:** Fall \_\_\_\_\_ (year) Spring \_\_\_\_\_ (year) Summer \_\_\_\_\_ (year)

**Verification of Enrolment Letters**  
*Confirms academic school year, enrolment, division, and major.*

Verification of Enrolment  
 Verification of Enrolment FORM to be completed: ATTACH FORM  
 Custom Letter: *Please explain*

**Verification of Graduation Letters**

Verification of Graduation (\*ALL grades must be entered before requesting.)  
 Graduation Invitation

Delivery Service Options <i>Includes pick up, email, or mail.</i>	Courier Fees <i>Please select one.</i>
<input type="checkbox"/> Standard (2-5 business days).....\$10 <input type="checkbox"/> Rush (1 business day: some exceptions may apply).....\$35 <input type="checkbox"/> Custom (5 business days).....\$25 <input type="checkbox"/> Additional copies (\$5 each).....\$ ____	<input type="checkbox"/> \$12.00 within Canada <input type="checkbox"/> \$17.00 to USA <input type="checkbox"/> \$35.00 to International

**Delivery Instructions**

Pick-up at the Office of the Registrar

Email address \_\_\_\_\_

Courier to 'mail to' address \_\_\_\_\_  
Phone number of recipient required

Mail to

\_\_\_\_\_ Name \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

**International Students Note:** Verification of Enrolment Requests for upcoming semesters require a **Tuition Deposit of \$1000.00**. This is a non-refundable deposit that will be applied to the student's tuition fees for the semester confirmed in the letter. After the letter is issued, the deposit will be forfeited if a student's enrolment status changes from full-time to part-time, or if a student withdraws from the semester.

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

**For Office Use Only**

REG: \_\_\_\_\_ NAT: \_\_\_\_\_ BD\$: \_\_\_\_\_ HLD: \_\_\_\_\_ CHG: \_\_\_\_\_ Verified: \_\_\_\_\_ Date: \_\_\_\_\_

**Total Service Fee** \_\_\_\_\_  MasterCard  Visa Card# \_\_\_\_\_ Exp \_\_\_\_\_ / \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Cardholder Signature \_\_\_\_\_  
 (must be written signature)