

Enrollment Verification Request

Name: Last Name, First Name				Date
Vanguard Student ID Number		Last 4 Digits of your Social Security Number		
An enrollment ver	ification letter inc	udes the dates of the	student's enrollment and units	completed for all semesters.
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Please check the boxes that correspond with the information you would like included.				
Birth date		G.P.A.	Social Security	Current Address
Other (Please	Specify)			
(7/2019) Enrollment Verification Requests are reserved for current active students. Former and alumni must request official transcripts. Enrollment Verification Requests must originate from the student's Vanguard email address only				
Recipient's Name				
Recipient's Full Address				
Recipient's FAX Number				
Signature				
Email to student's VU email address, only				

