

SMC VERIFICATION REQUEST FORM

SPECIAL INSTRUCTIONS: _____

VERIFICATIONS -- \$3.00 EACH (NON-REFUNDABLE)

This request will not be honored unless it is filled out completely and signed. Please note that verification letters left in the Admissions and Records Office more than 30 days will be discarded. Verifications take a **MINIMUM OF 2 WORKING WEEKS AND MAY NOT BE REQUESTED UNTIL THE START OF THE TERM.**

PLEASE INDICATE WHICH SEMESTER(S) AND YEAR:

SUMMER _____ FALL _____ WINTER _____ SPRING _____

Student's Name _____
PLEASE PRINT Last First Middle

Student ID Number _____ Date of Birth _____ Soc. Sec. No. _____ Phone Number _____

Signature: _____ Date: _____ Male

Female
F-1 Student? Yes
 No

METHOD OF DELIVERY: MAIL MAIL WITH FORM (MUST BE ATTACHED)
 PICK-UP

IF YOUR LETTER IS TO BE MAILED, FILL IN THE MAILING ADDRESS BELOW:

Send To: _____
Address: _____
City/State _____
Zip: _____

FOR OFFICE USE ONLY	
LOAN DEFERMENT (FREE) MAIL ONLY <input type="checkbox"/>	DATE FILED
HOUSING (FREE) <input type="checkbox"/>	NO. OF COPIES
NO. OF UNITS	AMOUNT DUE
SEMESTER	FILED BY

VERIFICATION TRACKING FORM WHITE- ADMISSIONS YELLOW-TO BE MAILED PINK-STUDENT