

REQUEST FOR CSN MEMORANDUM

Please note: Students <u>must</u> be enrolled in their classes <u>before</u> submitting this form! Check your Corsair Connect account for your enrollment date.

Date

(to be completed by student)

The student listed below is requesting a Memorandum and authorizes Santa Monica College to release any relevant information regarding his/her status to CSN. This consent may be revoked at any time, but the revocation will not affect any action already taken in accordance with this consent. Print student's name SMC ID# Student's phone Student's e-mail address Student's Major Student's signature Date Indicate your goals by checking all that apply: Transfer Other List intended transfer school(s) Please specify goals For Counselor use only **COUNSELOR VERIFICATION** This is to verify that the student named above has enrolled in the following courses for the summer/winter term: Units **Begin Date End Date** Course Days Time Gen Ec Transferable Yes Yes□ Yes Yes [No 🖂 No No 🗌 Yes Yes Yes Yes 🗌 No 🗌 No 🗆 No No [Yes 🗆 Yes Yes Yes 🗌 No 🗆 No No No Comments: _

Counselor's signature

Print counselor's name