University of Colorado Denver

VERIFICATION LETTER REQUEST FORMS

Student ID Number: _____   Student Status: ☐ Current Student ☐ Former Student

Student Name: _____

(If you are a former student please provide the name you had at the time of your enrollment, if applicable)

Student Address: **Student Email Address:**

_____   _____

Building number, Apt. number, Street

_____   **Student Telephone Number:**

Town, State, Zip Code   _____

Student Signature:

_____   **Date:** _____

Verification Type:

☐ **Enrollment Verification**   ☐ **Degree Verification**   ☐ **Method of Instruction**

☐ **Letter of Non-Enrollment**   ☐ **Tentative Degree Verification** (Letter of Program Completion MUST be submitted with Verification Request)

☐ **Pre-registration**   ☐ **Anticipated Date of Graduation:** _____

☐ **Attached 3rd Party Form**

Delivery Options:

☐ **Email:** _____

    (Current Students: Verifications are sent to your *@ucdenver.edu* address ONLY)

☐ **Fax:** _____   ☐ **Mail:** _____

                                                Name/ Company

☐ **Pick-up (Registrar's Office)**   _____

                                                Building number/Apt., Street Name

                                                _____

                                                Town, State, zip Code

Forms can be submitted via e-mail to registrar@ucdenver.edu or in person to the Student Commons Building, room 5005.
Enrollment cannot be verified for a future semester until the first day of classes.
Please allow 2 – 3 working days for completion during non-peak times; 3 - 5 working days during peak times.