

ENROLLMENT VERIFICATION

University of Southern Indiana
Phone # 812/465-1157

8600 University Blvd Evansville, IN 47712
Fax # 812/464-1911

Student's Name: (PRINT) _____

Student's Phone: _____

Student ID #: _____ - _____ - _____

1) _____ I WILL PICK UP WITH PHOTO ID

OR

_____ SEND TO THE FOLLOWING NAME AND ADDRESS

2) SELECT (X) THE TYPE OF VERIFICATION DESIRED:

A. _____ **ENROLLED IN THE CURRENT TERM**

(Provides expected grad date, major/minor info, GPA, academic standing, degrees)

B. _____ **COMPLETE ENROLLMENT HISTORY**

(All terms in which you have been enrolled, includes GPA and awarded degrees)

C. _____ **LOAN DEFERMENT**

(Enrollment history without GPA, expected grad date)

D. _____ **AUTO INSURANCE**

(Provides academic standing and GPA for current term)

E. _____ **HEALTH INSURANCE**

(Provides current term enrollment with major/minor information, no GPA)

F. _____ **EMPLOYMENT**

(Provides enrollment history and degrees awarded)

G. _____ **LANDLORD**

(Proof of enrollment, term dates and major/minor information)

I AUTHORIZE THE UNIVERSITY OF SOUTHERN INDIANA TO RELEASE THE ABOVE
REQUESTED INFORMATION AS INDICATED.

STUDENT'S SIGNATURE

DATE