



Enrollment Verification Request

Submit completed form by email to ccadmissions@yosemite.edu,
Electronically signed forms will ONLY be processed when using your Student Email.

The first two verification requests are FREE (expedited processing excluded). There will be a charge for subsequent verification requests. For expedited processing you can choose same day or two business day. See the Columbia College website for pricing or ask an Admissions & Records staff member. *Verification Requests will be processed within 5-7 business days from receipt of request.*

Please Note: Your enrollment verification will be based on the number of units you are enrolled in when Enrollment Services processes this request. Adding and/or dropping classes between the time of this request and the actual processing date may affect the number of units reported on this verification.

Today's Date: _____

Student Information:

First Name: _____ Middle Initial: _____ Last Name: _____

Student ID: *w* _____ Birthdate: _____ Phone: _____

Information to be Verified:

- Enrollment Status - Semester/ Year to be verified: _____
- Grade Point Average - Cumulative (unless otherwise stated)
- Academic Program/Declared Major
- Vehicle Insurance - Must be full-time, includes current enrollment and a minimum GPA of 3.0 for the previous semester.
- Other: _____

Check Only One Box for Type of Delivery:

- Send to my student email account
- Mail to address listed below

Pick up in-person
**Photo ID required*

**If you would like someone else to pick up your verification, insert name below:*

Name (Company or Self): _____

Attention To: _____

Mailing Address: _____

By signing below I understand I am giving consent for Columbia College to send my verification status to the information I listed or I must pick up the verification in-person and must bring a valid picture ID.

Student Signature: _____ **Date:** _____

| OFFICE USE ONLY | | | |
|--------------------------|-----------------------|-------------------------------------|--------------------------------------|
| Posted By: _____ | Posted Date: _____ | <input type="checkbox"/> First Free | <input type="checkbox"/> Second Free |
| | | <input type="checkbox"/> RQSS | |
| Processed By: _____ | Processed Date: _____ | Amount Owed: _____ | <input type="checkbox"/> Paid |
| Comments: _____ | | | |
| Student Signature: _____ | | Date Picked Up: _____ | |
| Staff Initials: _____ | Date: _____ | <input type="checkbox"/> Mailed | <input type="checkbox"/> Emailed |

07/2020