



Enrollment Verification Request

Please note the following prior to making your request:

- Verification of enrollment can be completed only for courses/units enrolled at Ohlone College.
- **Enrollment verifications cannot be completed on demand.**
- Most enrollment verifications can be processed within 5 business days.
- First and second verification requests are free.
- All subsequent requests are \$4.00 each.
- **Requests cannot be processed if you have an account balance with Ohlone College or a hold on your records.**
- Verification requests placed during a registration period will be completed after the census. Census dates can be found on the Academic Calendar in the course schedule or online

Submit completed form to: Admissions and Records by emailing to admissions@ohlone.edu

Please complete the following:

Student Name: _____

Last

First

Middle

Student ID# or SSN: _____ Phone Number: _____

Email: _____

Select your request from the following options:

- Verification of Enrollment: unit load, units attempted, dates of enrollment*
**Please note, an enrollment verification does not include GPA, course schedule information or grades.*
- Complete an attached form (loan deferment request, childcare assistance, housing assistance, etc.)*
**Only select this option if you have been provided with a form by the agency or business requesting an enrollment verification from you. This option does not count toward your 2 free enrollment verifications.*
- Other/Special Instructions*:
**Select this option for letters of non-enrollment, requests for a verified class schedule, or other verifiable enrollment information. Please note, if you need grades in addition to enrollment verifications, please request a transcript instead.*

I request that the above verification(s) be completed by Ohlone College on my behalf.

Student Signature: _____ Date: _____

Delivery Options

I would like my enrollment verification mailed to:

| |
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| |
| |
| |
| |

Received by: _____ Date: _____ **Office Use Only** Processed by: _____ Date: _____

Amount Due: _____ OR: (Check One) No Charge: 1st Request 2nd Request Attachment

Fee Sent to Cashier by: _____ Date: _____ Comments: _____