

## UNIVERSITY OF THE VIRGIN ISLANDS

<ol> <li>STUDENT ENROLLMENT VERIFICATION REQUEST FORM</li> <li>Instructions:         <ol> <li>Complete the form below to request parts of your academic record be verified to outside institutions.</li> <li>Email the completed form to the Office of the Registrar at registrar@uvi.edu</li> <li>Please complete one form for each request.</li> <li>Requests are typically processed in 2 to 3 business days.</li> </ol> </li> </ol>	
Student ID:	Contact Phone:
Date of Birth :	Date Requested:
Email Address:	
Parent Name/Signature	the student)
Student Signature	
Some of these items are considered confidential info Please check below the appropriate boxes on your	request:
	Indicate semester to be verified: ☐ spring ☐ fall
☐ Matriculation Date (start Date)	☐ Anticipated/Graduation Date
☐ Dates of Attendance	☐ Full-time/part-time status
☐ Level (undergraduate, graduate, etc.)	☐ Status (freshman, sophomore, junior, senior, etc.) ☐ Current Credit Hours
<ul><li>□ GPA (grade point average)</li><li>□ Never Attended</li></ul>	☐ Current Credit Hours

Note: The Family Educational Rights and Privacy Act (20 U.S.C. § 1232g; 34 CFR Part 99), as revised, states (a) An educational agency or institution may disclose personally identifiable information from an education record of a student without the written consent of the parent of the student or the eligible student if (1) The disclosure is to other school officials, including teachers, within the agency or institution has determined to have legitimate educational interests. (2) The disclosure is to officials of another school or school system in which the student seeks or intends to enroll.

Enrollment Verification Form Rev 5/04/2020