

**MAIL REQUEST TO:**  
OFFICE OF THE REGISTRAR  
BREVARD COLLEGE  
ONE BREVARD COLLEGE DRIVE  
BREVARD NC 28712  
PHONE: 828-641.0020



**EMAIL REQUEST TO:**  
ATTN: OFFICE OF THE REGISTRAR  
EMAIL: Registrar@brevard.edu

**Office of the Registrar  
Enrollment/Education Verification Request Form**

**Please print legibly and in ink: Current semester verifications will not be completed until after the drop/add period has ended.**

Verification for current semester?  Yes  No If not for current semester, please indicate semester to be verified \_\_\_\_\_

Student Name: \_\_\_\_\_ Indicate how to be processed:  
\_\_\_\_\_ Will pick up / Received: \_\_\_\_\_  
Address: \_\_\_\_\_ \_\_\_\_\_ Mail/Email To: \_\_\_\_\_

E-Mail Address \_\_\_\_\_ BC ID# \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Phone # (\_\_\_\_) \_\_\_\_\_ Cell Phone # (\_\_\_\_) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: Third party requests must be accompanied by written authorization from the student to provide requested information. Requests are processed in the order in which they are received. Normal processing time is 2-4 business days. Processing time increases during registration, graduation, and final grade posting.**

**(DO NOT WRITE BELOW THIS LINE)**

\_\_\_\_\_ This student graduated / is expected to graduate as follows:

Degree: \_\_\_\_\_ Date awarded / expected: \_\_\_\_\_

Major: \_\_\_\_\_

\_\_\_\_\_ Enrollment: Inclusive dates for periods of attendance verified are shown below:

**Period of Attendance Certified**

**Student Enrollment Status (12 semester hours = full-time)**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ We are unable to verify enrollment or graduation based on the information provided. Please provide additional information such as prior names used, etc.

\_\_\_\_\_ Comments: \_\_\_\_\_

We certify the above information is accurate as of the date of this signature. If you have additional questions please contact the Office of the Registrar at 828-641.0020.

\_\_\_\_\_  
Registrar

\_\_\_\_\_  
Date

\_\_\_\_\_  
College Seal

**FOR OFFICE OF THE REGISTRAR USE ONLY:**

Date Received: \_\_\_\_\_ Date Processed: \_\_\_\_\_ Initials: \_\_\_\_\_

7.09.2021