**Verification of Enrollment**

**OFFICE USE ONLY**

S060/S061 \_\_\_\_\_\_\_\_\_\_\_

Amount Paid \_\_\_\_\_\_\_\_\_\_\_

Receipt No. \_\_\_\_\_\_\_\_\_\_\_

Pick-up On. \_\_\_\_\_\_\_\_\_\_\_

No Charge **🞏**

 **East Los Angeles College**

 **Office of Admissions & Records**

 **1301 Avenida Cesar Chavez**

 **Monterey Park, CA 91754**

 **(323) 265-8801**

**Name:**   **Student ID #:**

 **Last First MI**

**Address: Date of Birth:**

 **Number Street**

 **Email**:

 **City State Zip Contact Number:**

**Other Names Used**:

 **Last Name First MI**

**🞏 Regular Verification (Mail only, no pick-up option available):** Regular Verifications are **$3 per copy**. If you have never requested transcripts or verifications the first two (2) copies are free. Verifications are processed and mailed within 10 working days from the date of receipt.

**🞏 Emergency Verification - 🞏 Mail or 🞏 Pick-Up:** Emergency Verifications are **$10 per copy**. If you have never requested transcripts or verifications the first two (2) copies are **$7 per copy**. Emergency Verifications are processed immediately and ready for pick-up during posted hours.

**Semester/Year (Please check one): One verification per semester.**

**🞏** Winter: **🞏** Spring: **🞏** Summer: **🞏** Fall:

 Year Year Year Year

Name/Agency:

 (Write in the name of the agency the verification is for, if it is for yourself please write in “self”.)

Attention:

Address: City: State: Zip:

**Type of Verification (Please check one):**

Official College Print-Out (Please check one below): Student Provides Form (Please check one below):

 🞏 Class Schedule 🞏 Child Care 🞏 Student Loan Deferment (No

 🞏 Enrollment Status 🞏 Employment fee applies if submitted by College to

 🞏 Good Student Discount loan agency).

 🞏 Medical Insurance

 🞏 Other:

Student Signature: Date:

 (Authorization for release of information)

Released to: Date:

 (Sign when picking-up verification)

**Office Use Only**

**Processed by:**  **Date**: **Semester:** **Units:**

 Revised 9/2010