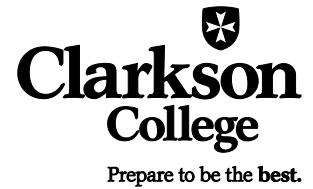


Information Release Request



Instructions: Return completed form to the Registrar's office. This request may be submitted by mail, by fax or in person. Information is only released upon the student's written request. All holds on a student's account must be cleared before information can be released..

Processing time: Once a request has been received by the Registrar's office, the requested information will be mailed within two business days during non-peak times, 5-7 business days during peak times (December–January, April–May and July–August).

REQUESTOR INFORMATION Please print clearly.

_____ LAST NAME, FIRST NAME		_____ STUDENT ID	
_____ CURRENT ADDRESS		_____ CITY	_____ STATE
		_____ ZIP	
_____ CURRENT PHONE NUMBER	_____ PROGRAM OF STUDY		_____ TERM

Please release the following item(s):

Enrollment Verification Letter _____
SPECIFY SEMESTER

Other _____

Send information to:

- Will pick up from Clarkson College
- Fax

_____ ATTENTION TO	_____ FAX NUMBER
<input type="checkbox"/> Mail Provide the complete address where the information is to be mailed.	

_____ SIGNATURE	_____ DATE
--------------------	---------------

CONTACT

Clarkson College Registrar's Office
101 South 42nd Street Omaha, NE 68131-2739
PH 402 552 3033 TF 800 647 5500 FX 402 552 6165
registrarstaff@clarksoncollege.edu

OFFICE USE ONLY

Input by _____ Date _____