IOWA STATE UNIVERSITY

You can complete this form on your computer. To complete a field, use the hand tool and click on a line or in a field.

Request for Certification Letter

Office of the Registrar * 214 Enrollment Services Center * Ames, IA 50011-2011 * Fax: 515-294-1088

Name_____
Last **First** **Middle**

***Daytime Phone (_____)_____* Print your e-mail address** _____
** In case we need to contact you with questions about your request.*

Univ. ID _____

_____ **# Copies requested**

What type of letter you need?

☐ **enrollment certification for term(s):** _____

☐ **good student or good academic standing**

☐ **graduation term:** _____
degree: Bachelor's Master's Ph.D.

☐ **degree verification**

☐ **class rank based on term:** _____

major: _____ **2nd major** _____

level: ☐ **undergraduate** ☐ **graduate**

In the space below, indicate any additional specific information you need in the letter such as course listing for a specific term, current cumulative grade point average, SSN, etc. *The Office of the Registrar reserves the right to charge for certain services.*

Select one of the following:

☐ **Pick up in 214 Enrollment Services Center** (available in 2 working days)

☐ **Mail certification to address below:** (allow a minimum of 2 working days)

_____

_____

_____

Student Signature _____**Today's Date** _____

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For Office Use Only Time & Date for Pick-Up _____Request Taken by: _____

ID Checked _____ Holds Checked _____