



# Fort Lewis College

Registrar's Office  
1000 Rim Drive  
Durango, CO 81301  
970.247.7350  
Fax: 970.247.7598

## Enrollment and Degree Verification Request Form

Please allow 3-5 business days for processing.

---

---

---

---

*Address where verification should be mailed.*

I would like to pick-up my verification (photo ID is required). Phone: \_\_\_\_\_

Select the information to be verified:

- |   |  |
|---|--|
| <input type="checkbox"/> Enrollment Status                                | <input type="checkbox"/> Degree Program              |
| <input type="checkbox"/> Academic Standing                                | <input type="checkbox"/> Grade Point Average         |
| <input type="checkbox"/> Degree Awarded                                   | <input type="checkbox"/> Anticipated Graduation Date |
| <input type="checkbox"/> Pre-registration Verification (for future terms) | <input type="checkbox"/> Other _____                 |

SEMESTER(S) to be verified:

YEAR(S) to be verified:

Fall  Winter  Summer

Year: \_\_\_\_\_

I authorize Fort Lewis College to release the information indicated to the party listed above:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
ID#