1. LETTER REQUEST

If you would like to have a letter generated, please check no more than 2 contents that you would like to include, then proceed to section 3. Skip this section if you would like to have a form completed and go to section 2A or 2B.

- Accumulated GPA
- Certification of graduation (Bursar and Library clearance is required)
- Credits earned
- Enrollment history
- Expected date of completion
- Verify current enrollment (Attend at least 1 week)
- Verify date of completion (Bursar clearance is required)
- Other (Specify; attend at least 1 week)

2A. FORM TO BE COMPLETED

Complete this section only to have the Registrar fill the form that you have provided.

- In-school Loan Deferment (Attend 4 weeks; present a Deferment form with this request)
- VA Benefit (Attend 2 weeks; present a VA form with this request)
- Other (Specify)

2B. Form to be completed: ___ ACD ___ FIA Enrollment ___ OES

* Purpose 2-8 Human Services students on public assistance or receiving child care must attend at least 1 week of classes.
* Work study students must enclose a copy of the hours from the supervisor with this form. Your coordinator must verify the hours.

<table>
<thead>
<tr>
<th>Field work site</th>
<th>Address, apt/floor</th>
<th>Supervisor (last, first)</th>
<th>Supervisor telephone</th>
<th>Days and hours</th>
<th>Print name and sign</th>
</tr>
</thead>
<tbody>
<tr>
<td>Career Services</td>
<td>Department Supervisor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Over, please)
LETTER REQUEST/FORM COMPLETION (continued)
Complete either section 1 or 2 on the opposite side before proceeding to sections 3-6 below.

3. STUDENT INFORMATION
SSN or ID number ________________________________
Student (last, first) __________________________________________
Address, apt/floor __________________________________________
City, state, and zip __________________________________________
Mobile telephone _________________________________
Is this address new? ___ Yes ___ No
Is this phone number new? ___ Yes ___ No
Degree (check one) ___ Associate ___ Bachelor ___ Graduate ___ Other
Curriculum (e.g., Business, Education) ________________________________
Present semester Spring 20___ Summer 20___ Fall 20___
Current purpose #___ ___ I am not presently attending ___ I have graduated

4. ADDRESSEE INFORMATION
The “addressee” is the person, other than yourself, for whom this request is intended. Although you may request a copy for personal use, please write the addressee’s contact information below.
Contact (last, first) __________________________________________
Company ___________________________________________________
Address, apt/floor __________________________________________
City, state, and zip __________________________________________

5. HOW TO PROCESS THIS REQUEST
The usual turnaround for most requests is 1 to 2 business days (some exceptions apply).
Select no more than 2 of the following:
___ For personal use: please mail a copy to me (letter requests only, not completed forms)
___ For personal use: please do not send my copy, I will retrieve it at the Manhattan office
___ For personal use: please do not send my copy, I will retrieve it at the Bronx
___ Please mail to the addressee (section 4)
___ Please fax to the addressee ______________________________________________

6. SIGNATURE
I have completed the opposite side of this page and provided any necessary forms.
Student, sign and date __________________________________________

You may mail, fax, or present this form in-person (see header on the reverse side).
__________________________________________

OFFICE OF THE REGISTRAR USE ONLY

Attendance confirmed, sign and date__________________________
Revised 9/2019