



# Verification of Enrollment/Transcript Request

PLEASE PRINT

Date: \_\_\_\_\_

TO: Registrar

FROM: Student Name \_\_\_\_\_ Student ID #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Degree Program: \_\_\_\_\_

- Bachelor of Arts in Biblical Studies (BABS)
- Bachelor of Arts in Bible (BAB)
- Bachelor of Arts – General Studies (BA)
- Bachelor of Science in Business Administration (BSBA)
- Bachelor of Science – Urban Ministry Leadership & Biblical Studies (BS)
- Bachelor of Science in Human Services (BSHS)
- Associate of Arts in Bible (AAB)
- Associate of Arts in Biblical Studies (AABS)
- Concentrated Bible Course Certificate (CCBC)

*On my behalf, please send:*

- Verification of Enrollment       Official Transcript       Unofficial Transcript

TO: Company/Institution: \_\_\_\_\_

Attention: \_\_\_\_\_

Department: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Information/Comments: \_\_\_\_\_

Please Send Via (Check All That Apply):

- Pick up       Fax– Number: (\_\_\_\_\_) \_\_\_\_\_
- USPS       Email: \_\_\_\_\_

Student's Signature (mandatory) \_\_\_\_\_

<b>OFFICE USE ONLY</b>	
Date Processed: _____	INT: _____