



STUDENT VERIFICATION

Send to: _____

Student: _____

ID#: _____

Date: _____

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For Office Use

The above-named student has requested that we provide you with the following information concerning her/his enrollment at Schenectady County Community College:

The student is matriculated in the _____ program.

The student is not matriculated in a program but is taking courses on a non-degree basis.

The student received an _____ degree or certificate with a major in _____ issued in _____.

The student has registered for the term listed below. The term will begin on _____ and she/he can drop all courses with a full refund through that date.

The student is/was enrolled at SCCC during the terms listed below:

TERMS/DATES

CREDITS

Sincerely,

Registrar