## UNIVERSITY of WASHINGTON BOTHELL

## **ENROLLMENT VERIFICATION**

Only complete this form if you have downloaded an Enrollment Verification Certificate from the National Student Clearinghouse, and have written a statement as to why the certificate is not sufficient for proof of enrollment.

Print Name as it appears on your official Unive	ersity Recor	d.				
Name (Last)		(First)	(First)			(Middle Initial)
Former Name(s)		JW Student #		Date of Birth	Birth	
Daytime Phone Number ( )	Er		Email Address		FOR OFFICE USE ONLY	
Current Street Address				Processed by:		
(City) (State)		) (Zip)			Mail Date:	
					Pick-Up Date:	
Certificate Pick up Certificate			lress (listed above) ess (listed right)			
	Subr		nature Required uwbreg@uw.edu		Today's D	ate

Updated: 11/2023