

California State University, Los Angeles  
**Office of the Registrar**  
**Letter and Form Certification Request**

**Note:** The Records Office can verify enrollment for *current and/or previous quarters*. Please submit this form to the Office of Enrollment Services, Administration 146. (Extended Education enrollment verification will not be processed until the third week of the quarter).

\_\_\_\_\_ *Campus Identification Number*

\_\_\_\_\_ *birth date*

\_\_\_\_\_ *today's date*

**PLEASE PRINT**

\_\_\_\_\_ *last, first, m.i.*

\_\_\_\_\_ *signature*

\_\_\_\_\_ *major*

\_\_\_\_\_ *anticipation graduation date*

Class level (*circle one*):    freshman    sophomore    junior    senior    graduate

Are you enrolled through Extended Education? (*circle one*):    yes    no

To ensure satisfactory service, please complete this *Letter and Form Certification Request* clearly and accurately. If you are submitting a form with attachment be sure that your portion is filled out completely.

Enrollment status for all students falls into one of the following categories:

Full-time	enrolled in 12 or more units
Half-time	enrolled in 6-11 units
Part-time	enrolled in 1-5 units

**Note:** Each unit of graduate (500-level) courses is considered as 1½ units (when taken by postbaccalaureate or graduate students) for enrollment status certification purposes only.

Please verify the following from my Cal State L.A. academic record. (*Please print your request on the lines below. If you do not show the requested information below, this form will be returned to you unprocessed.*)

\_\_\_\_\_

\_\_\_\_\_

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Please indicate a mailing address  
 (Allow 3 days for completion of request.)

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For office use only		
Mailed	_____ <i>date</i>	_____ <i>by</i>
Pickup date	_____ <i>date</i>	_____ <i>completed</i>
Return to Student on	_____ <i>date</i>	_____ <i>by</i>