



Global Campus

# Enrollment Verification Request Form

SDSU Global Campus: Registration Office  
5250 Campanile Drive, San Diego, CA 92182-1925  
Phone: (619) 594-5152 Fax: (619) 594-0147

**Instructions:** Fill out all sections of the attached form and contact [ces.registrar@sdsu.edu](mailto:ces.registrar@sdsu.edu) for a secure email link. Please ensure you have completed the recipient section.

## Student Information

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

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name \_\_\_\_\_

RedID: \_\_\_\_\_ OR SSN# \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_

Former Name (if applicable) \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date of Birth \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_

Estimated Dates of Attendance Start: \_\_\_\_\_ Estimated Dates of Attendance End: \_\_\_\_\_

## Letter Type

- Verification of enrollment
- Letter of Non-Attendance (never attended SDSU Global Campus or SDSU)
- Letter of Intent to Enroll (desire to enroll in Open University for a specific term/units)
- Complete the attached inquiry form

Notes: \_\_\_\_\_

Purpose: \_\_\_\_\_

## Delivery Method:

- Email via Voltage secure email to:

Name: \_\_\_\_\_

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

By signing below, I am requesting SDSU Global Campus release the enrollment information indicated above on my behalf to the party listed above.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use:** Date Received: \_\_\_\_\_ Date Emailed: \_\_\_\_\_