

Certification of Current Enrollment Status

I confirm that the below mentioned student is a currently enrolled and pursuing studies at our institution and is in good standing.

Student Full Name:	
Student Date of Birth:	
Student Field of Study (Major):	
Degree Type (Associate's,	
Bachelor's, Master's):	
Expected or Actual Graduation	
Date (mm/dd/yyyy):	
, , , , , , , , , , , , , , , , , , , ,	
University/Institution Name:	
University Stamp or Seal: Must be original stamp, not digital.	
Representative Name:	
Representative Title:	
Representative Signature:	
Must be original signature.	
Date:	