

DEPAUW UNIVERSITY
Registrar's Office, Admin. Bldg.
P.O. Box 37
Greencastle, IN 46135-0037
Phone: 765-658-4141
Fax: 765-658-4139



Accredited by North Central
Assoc. of College &
High Schools

Federal Code: 001792
CEEB Code: 1166

STANDARD ENROLLMENT CERTIFICATION

This certification is designed to expedite the reporting of academic record information. We appreciate your acceptance of this certification in lieu of completing a form that may have been provided.

STUDENT NAME: _____ **E-MAIL:** _____ **SOC. SEC. #** _____
Last, First M.I. Username

Only check items to be furnished/verified. **Information for those items will be provided by the registrar's staff.**

- 1) " Semester(s)/year(s) to be verified:
Dates of above terms:
- 2) " Number of course credits currently registered:
(One course credit equals four semester hours)
Dates of current term:
- 3) " Number of course credits **PREREGISTERED** for next term:
(Adjustment deadline is sixth day of classes) Term dates:
- 4) " Anticipated date of graduation:
- 5) " Eligible for good student discount (B average or better)
" YES " NO*

* Check and sign below if you want GPA's included on form.

- " Yes, include cumulative GPA
- " Yes, include most recent semester GPA

I authorize the release of the information requested above.

STUDENT'S SIGNATURE **DATE**

- " I will pick up " Mail in envelope provided
- " Send to address below

ATTN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

KEY TO ENROLLMENT STATUS

This portion to be completed by Registrar's Office Staff.

- " Full-time (Min. 3 course credits)
- " At least half-time " Less than half-time
- " Has "B" (3.00) or above average for immediately preceding semester
- " In good standing and eligible to continue
- " Date Graduated: _____
- " Degree Earned: _____

Comments: _____

Authorized Signature Date

Institutional seal affixed on official certifications unless faxed.