

| | | |
|-------------------------|------------|-------------------|
| Last Name | First Name | CUNY first Number |
| Address | Apt. No. | Phone Number |
| City | State | Zip Code |
| Preferred Email Address | | |

Please check the option that is applicable:

- | | |
|---|---|
| <input type="checkbox"/> Current semester enrolled <small>(Full-time or part-time status will automatically be included)</small> <input type="checkbox"/> Previous semester(s) enrolled Please indicate _____ <input type="checkbox"/> Actual graduation date <input type="checkbox"/> Standard Dept. of Labor certification | <input type="checkbox"/> Current semester grades <small>(For students on permit only, all others should request a transcript)</small> <input type="checkbox"/> Expected date of graduation Please indicate _____ |
|---|---|

Briefly state additional information you are requesting regarding the current semester.
 (It is NOT possible for the College to certify certain information such as personal or financial details.)

| | |
|------|---------------------|
| Date | Student's Signature |
|------|---------------------|

If picking up letter please check here:

If letter is to be mailed please complete information below:

Name _____

Address _____

City _____ State ____ Zip Code _____

Please note Certification Letter Request Policies:

1. All requests received are processed on a first come, first served basis.
2. Please allow 7-10 business days for processing.
3. Student's Photo I.D. is required to submit this form; therefore, fax requests are not accepted.
4. **Student's Photo I.D. and the Registrar's date stamped receipt must be presented to pick up completed requests.**
5. Requests to certify multiple semesters cannot be processed; student must obtain a copy of his/her transcript.