

The University of Southern Mississippi
Office of the University Registrar
118 College Drive #5006
Hattiesburg, MS 39406-0001
Phone: (601) 266-5006 Fax: (601) 266-5816

Request for Letter of Verification

NOTE: All letters will include: Name, Social Security Number, Major, Classification, Dates of current semester, and only Full-time or Part-time status. Verifications cannot be faxed due to federal privacy laws.

Print Please:

Name: _____
 First Middle or Maiden Last

Empl ID/Student Number: _____

Information Needed. Please check:

- _____ Letter of Good Standing
- _____ Enrollment Verification (current semester only)
- _____ Anticipated date of graduation (Provide date, month & year _____)
- _____ Degree(s) Earned
- _____ History of Enrollment (includes all of above)
- _____ Grade Point Average (GPA)
- _____ **Pick-up (Twenty-four hour notice required)**

Fill in the complete address for mailing:
(Verification will not be mailed to insurance companies)

Signature

Date