



Southern
Illinois University
Carbondale

CURRENT TERM ENROLLMENT VERIFICATION FORM

Office of Records and Registration, Woody Hall A-115, Mailcode 4701, Carbondale, IL 62901
Phone 618-453-2993; Fax 618-453-2915

This form is used to request an official copy of the current term enrollment verification. Please complete this form in its entirety, print and sign your name and indicate your Banner identification number in the space provided. The full address and/or fax number will also be needed to send your request to a third party. If you are sending verification to more than one party, please complete a separate form for each one.

Name: _____

Please Print: Last Name, First Name, Middle Name

Signature: _____

Student Signature is Required

Banner ID#: _____

Mail Current Term Enrollment Verification Form to the Following:

Name: _____

Address: _____

OR

Fax To: Name: _____ Fax Number: _____