

VERIFICATION REQUEST FORM

The National Student Clearinghouse, Michigan State University's authorized agent, provides Enrollment and Degree information. Professional and business organizations are encouraged to utilize this resource. If additional information is required, complete this organization certification request form and return it to:

Office of the Registrar Michigan State University Hannah Administration Building 426 Auditorium Road, Room 150 East Lansing, MI 48824-2603

Email requests to reg@msu.edu Faxed requests may be directed to (517) 432-3347

| | | Date: | |
|------------------------------|--------------------------------------|-----------------|--|
| | | | |
| Phone Number: | Email: | | |
| Reason for Request: | | | |
| Disciplinary Reco | ords Required | | |
| Academic Integri | ty/Dishonesty Records Required | | |
| Information not a | vailable through the National Studen | t Clearinghouse | |
| Special Instructions/Attachr | ments: | | |
| Student Name: | | Student PID: | |
| (Certification requests v | vill not be processed without stude | nt signature) | |
| Mail to Address: | | | |
| | | | |
| | Ct. 1 | Zip: | |

For Office Use: Date Mailed _____