

**Everett Community College Verification Request**

Please submit this form to Enrollment Services via email at [registration@everettcc.edu](mailto:registration@everettcc.edu) or in person at Parks Student Union, Room 201. Processing time for verification requests is 3-5 business days.

Questions? Email [registration@everettcc.edu](mailto:registration@everettcc.edu) or call 425-388-9219.

**STUDENT INFORMATION**

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_ ctcLink ID Number \_\_\_\_\_

Last quarter attended \_\_\_\_\_

**DELIVERY METHOD**

Please select how you would like your verification to be delivered.

I'll pick it up    Mail it – fill out address below    Fax it – fill out fax number below

Email it – fill out email address below

Recipient's name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email address \_\_\_\_\_

Phone number \_\_\_\_\_ Fax number \_\_\_\_\_

I, \_\_\_\_\_, request a verification letter stating that I am a student at Everett Community College (please check one below)

full time (at least 12 credits)

part time (less than 12 credits)

half time (at least 6 credits) – for Financial Aid and Student Loan purposes

not enrolled

for    Fall    Winter    Spring    Summer   quarter \_\_\_\_\_ year.

Additional information as necessary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Student signature** \_\_\_\_\_ **Date** \_\_\_\_\_

FOR ENROLLMENT SERVICES USE:

Received by \_\_\_\_\_ Date \_\_\_\_\_

Completed by \_\_\_\_\_ Date \_\_\_\_\_