

## REQUEST FOR VERIFICATION LETTER

*(Please allow 2-3 working days)*

Name: \_\_\_\_\_ Today's date: \_\_\_\_\_

ID Number: \_\_\_\_\_ Date needed: \_\_\_\_\_

**Send Verification to the following:**

Send letter to the address below:

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

Send letter to my campus PO Box: \_\_\_\_\_

Pick up at the:  CSB or  SJU Registrar's Office

Fax to: Name/Attention: \_\_\_\_\_

Fax Number: \_\_\_\_\_

If the verification is to be faxed outside of the U.S., the minimum fee will be \$5.00. We will charge your Student Account at the end of the month.

**Please check information to be included in the letter:**

FT Enrollment for:  current semester  previous semester  former student history

International students needing verification for travel purposes indicate here

Other information needed in verification letter:  Major  Graduation expected date

Degree awarded: \_\_\_\_\_

If verification is needed for insurance purposes, provide the name of the person who carries the insurance \_\_\_\_\_ along with their Group/Policy Number \_\_\_\_\_

If you have any questions, please call Jane at 320-363-3395 or send an e-mail to [jstromme@csbsju.edu](mailto:jstromme@csbsju.edu)

Send this form to: College of Saint Benedict/Saint John's University  
Registrar's Office - Attention: Jane  
PO Box 5511  
Collegeville, MN 56321