School Verification

Student:	SSN:
Name of School	
I certify that the above named student is	s in good academic standing and is:
Currently enrolled	I full-time
	I half-time. lefined as the academic institutions' llf-time course load.
High School Student	
The approximate date of graduation wil	Il be Date
College Student	
Student requires credit hours curriculum.	for completion of his/her Undergraduate/Graduate
As of he/she has completed _ Date	of the hours needed to graduate.
The approximate date of graduation wil	Il be Date
 Date	 Counselor/Coordinator

MUST HAVE SCHOOL SEAL TO BE VALID