

Directions: Complete this form and email a PDF copy to registrar@wou.edu. You do have the option to submit your petition as a PDF file from your WOU email address. This will serve as verification in place of a physical signature. Reach out to the Office of the Registrar if you have questions or require assistance at (503) 838-8327.

Allow 5 business days for processing

Student ID _____ **Date of Birth** _____

Last Name _____ **First Name** _____

REQUESTED INFORMATION

Please select all that apply to be included in the correspondence.

- Earned credit hours Transfer credit hours Current term enrollment level Current Academic Standing
 Credit hours remaining to graduate Graduation date or anticipated graduation date

Enrollment for past terms (list all) _____

Other _____

REASON FOR REQUESTING VERIFICATION LETTER

- Scholarship Purposes Graduate school admission Job requirement

Other reasons _____

*Note: If you are a SACM student needing verification of enrollment, online-hybrid coursework, anticipated date of graduation, credits earned, what if I change my major/minor, or other requests, you will need to fill out the verification enrollment request link in your student portal.

PREFERRED FORM OF NOTIFICATION

(Please **choose one**. We will notify you when the request is completed.)

Phone call: _____ Fax: _____ Email: _____@wou.edu

Mail directly to: _____

Student Signature _____ Date _____

Office use only:

Notified Student

Received by & date _____

Processed by & date _____