



Office of the Registrar
 Enrollment Management
 131 College Circle
 Swainsboro, GA 30401
 Tel: (478)289-2014 Fax: (478)289-2353

Enrollment Verification Request

- It is the student's responsibility to provide the full address or fax number to the registrar's office to process your request.
- Enrollment verifications are usually sent two weeks after the start of the Semester (after Institutional drops have been completed).
- Request will not be processed until all outstanding holds are satisfied.
- Please allow 3 business days for processing.

Please complete the form and submit using one of the following methods:

Mail: East Georgia State College 131 College Circle Swainsboro, GA 30401	Email: records@ega.edu OR documents@ega.edu	Fax: (478)-289- 2353
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Student Name: _____ Student ID # _____
 (Please print)

Mailing Address: _____
 (street) (City) (State) (Zip Code)

Phone # _____ Secondary Phone # _____

Last Term attended: _____ Check here if you are currently attending

<p>Instructions: <input type="checkbox"/> Pick up (Swainsboro campus Only) <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email to:</p> <p>Name/Attention: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Fax # (_____) - _____ - _____ Email (if applicable): _____ @ _____</p>
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Please indicate verification request needed:

- Enrollment Verification (Current Semester) Letter of Non-attendance Letter of Pre-registration (Prior to Semester start)

Student Signature (required): _____ Date: _____