

REQUEST FOR ENROLLMENT VERIFICATION

INSTRUCTIONS: Complete the form fax (925-3716 or 424-5119), mail (3060 Wilson Road, SW, Birmingham, AL 35221 or 1100 9th Avenue, SW, Bessemer, AL 35022) or drop it by the Record's Office on Birmingham or Bessemer Campus. Requests will be processed within 24-48 hours. However, they will usually be available by the next business day.

LAWSON STATE COMMUNITY COLLEGE	AUTHORIZATION INFORMATION	Name: _____ Date _____			
	DELIVERY INFORMATION	ID or SS#: _____	Phone #: _____		
		Email Address: _____			
		Address: _____			
		Street	City	State	Zip
		<i>I hereby authorize Lawson State Community College to release enrollment information to the agency, institution or person listed below.</i>			
		_____			_____
		Signature			Date
		Choose <u>ONE</u> of the following options (one per request form)		TERM & ACADEMIC YEAR:	
		<input type="checkbox"/> I WILL PICK UP WITH PHOTO ID		<input type="checkbox"/> FALL _____	
		<input type="checkbox"/> MAIL TO THE NAME AND ADDRESS BELOW		<input type="checkbox"/> SPRING	
		<input type="checkbox"/> FAX TO THE NAME AND NUMBER BELOW		<input type="checkbox"/> SUMMER	

NOTE: This form is designed to request enrollment verification for **LOCAL INSTITUTIONS AND AGENCIES ONLY**. Lawson State Community College has authorized National Student Clearinghouse to provide enrollment verifications. **The National Student Clearinghouse** can be contacted at: **Web:** www.enrollmentverify.org **Mail:** National Student Clearinghouse 13454 Sunrise Valley Drive, Suite 300, Herndon, VA 20171 **FAX:** 703-742-4239