

**NATIONAL UNIVERSITY**

**2008-2009**

Financial Aid Office  
11355 North Torrey Pines Road  
La Jolla, CA 92037-1011  
(858) 642-8500

**VERIFICATION OF ENROLLMENT**

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

**Section I:** This section is to be completed by the other family member attending college. Please ask him/her to take or mail this form to the college/university he/she is attending.

**Section II:** This section is to be completed by the Registrar of that college/university.

**Section I**

To be completed by the student's family member before submitting to their college/university.

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
(Last) (First) (Initial)

Student I.D. Number: \_\_\_\_\_

Type of Degree/certificate program: \_\_\_\_\_

- Full-Time (12 units or more)
- Three-Quarter Time (9 to 11 1/2 units)
- Half-Time (6 to 8 1/2 units)
- Other (1 to 5 1/2 units)

This request is for the Term 2008\_\_ 2009 \_\_  Fall  Winter  Spring  Summer

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section II**

The above student is/has been registered in a degree or certificate program for the following enrollment period:

Term 2008\_\_ 2009 \_\_  Fall  Winter  Spring  Summer

- Full-Time (12 units or more)
- Three-Quarter time (9 to 11 1/2 units)
- Half-Time (6 to 8 1/2 units)
- Other (1 to 5 1/2 units)

Registrar's Name: \_\_\_\_\_

Name of College: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

