



Enrollment Verification Request Form

This form authorizes college officials to confirm your enrollment (hours enrolled, full-time/part-time status, semester start and end dates) for a semester. If you need verification of your entire academic career you will need to request a transcript. Verifications will be processed for paid students only.

Requests are normally processed within 5 business days. Requests for upcoming semesters will be processed after the add/drop period ends.

Name _____ Student ID _____ Date of Birth _____

Last, First MI

Semester you wish to be verified _____

Please Select:

Mail to: _____

Fax to: (_____) _____ - _____

Attention: _____

Send to my New River CTC email

By typing my name below, I understand and agree that this form of electronic signature has the same legal force and effect as a manual signature.

Student Signature

Date

To submit this form:

Email: registrar@newriver.edu

Fax: 304-929-6719

Mail: Registrar's Office 280 University Drive, Beaver, WV 25813

Registrar's Office Forms

06/08/2020