VERIFICATION OF ENROLLMENT

OFFICE OF THE REGISTRAR
DELAWARE STATE UNIVERSITY
1200 N. DuPont Highway
Dover, DE   19901
Telephone: 302-857-6375/Fax: 302-857-6379

REQUEST WILL BE HONORED WITHIN 3-5 BUSINESS DAYS.
HOWEVER, DURING BUSY PERIODS, SUCH AS REGISTRATION, PRE-
REGISTRATION, FINAL EXAMINATIONS AND COMMENCEMENTS ADDITIONAL
TIME WILL BE NEEDED. We appreciate your patience.

NAME_______________________________________________________

ID# D10________________         or SSN ______________

CURRENTLY ENROLLED _______YES _______NO

PICK-UP ☐

FAX ☐    FAX #______________________________

MAIL INFORMATION TO: ________________________________________

_____________________________________________________________

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STUDENT’S SIGNATURE_________________________________________

DATE ________________

Revised 6/15/10