



Member of



Request for Enrollment/Degree Verification

NOTE: Enrollment Verifications will be completed after the first day of classes for the term requested.

Date: _____ Student ID: _____

Name: _____
Last First Middle

Phone Number: _____ Email: _____
Area Code

Request Current Semester Enrollment

Request Enrollment History

Request Degree Verification

Please mail to: (include name, address, state and zip code)

OR

I will pick up on _____

Who should the request be made attention to _____

Student signature _____

RECORDS OFFICE USE ONLY

Processed by: _____ Date: _____

NSCC 22-25-01. NSCC is a TBR institution, an AA/EEO employer, & does not discriminate against students, employees, or applicants for admission or employment on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression,

disability, age, status as a protected veteran, genetic information, or any other legally-protected class. Policy inquiries:
Human.resources@nsc.edu. Digital distribution, © 2024, NSCC. **Updated 7.26.2024 KT**