In accordance with the Federal Educational Rights and Privacy Act of 1974 (FERPA), all information regarding a student’s academic record is considered private between the student and the university and requires a written release for sharing with a third party. Complete this form to request a certification of your enrollment for non-U.S. entities. Enrollment certification for U.S. entities must be obtained from the University Registrar’s Office.

Student Information – All fields are REQUIRED

Please use the Surname/Primary Name field if you only have one name. The Given Name field is to be used for all other names.

Surname: ___________________________________________ Given Name: ________________________________________________

VT ID: (last 4 digits) ___________ SEVIS ID#: _____________ VT Email: _____________ Phone #: __________________

Major or Department: ___________________________________________ Estimated Graduation Date __________________________

Number of copies needed

☐ Certification of enrollment only ______________

☐ Certification of enrollment and educational expenses ______________

☐ Certification of enrollment and educational and living expenses ______________

If you need any other special information included in the letter, please specify here: ________________________________________________

____________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________

I authorize the Graduate School to provide the requested information in an enrollment certification letter. I understand that the type of information that may be provided pertain to my status as a student, verifiable financial information, cost of enrollment, and my immigration status. I understand that, if I want someone else to pick up this letter on my behalf, I must provide permission from me, in writing, along with a form of photo identification.

Signature: ______________________________ Date: __________________________

I give permission to ____________________________ to pick up the enrollment certification letter on my behalf.