



**Student Information**

Full Name			Student ID Number		
Contact Phone		Contact E-Mail			
Signature				Date	

By signing this form, I am authorizing the Office of the University Registrar to provide any information necessary to complete this request for certification. This information may be released to me or mailed to the address listed below.

**Directory Information:** The University has defined directory information as the following: name, address, phone number, email address, major, dates of attendance, enrollment status, anticipated graduation date, class, academic level, application for degree, and degrees conferred. To receive any information not included in the previous list, the student must provide the Office of the University Registrar with his/her signed authorization. Note that the University cannot list a student's identification number without the student's written authorization. E-mail is not an acceptable form of written authorization. The University cannot verify students' dates of birth, Social Security Numbers, or other information which cannot be verified via students' education records at Virginia Tech. **Note:** This request will be processed in compliance with the Federal Family Educational Rights and Privacy Act of 1974, as amended.

**Information Requested**

Please provide written certification of the following information. *(Check only the information being requested.)*

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| <input type="checkbox"/> Enrollment for the Current Term   | <input type="checkbox"/> Current Cumulative Grade Point Average (GPA)<br><i>(GPA provided will be for the student's current level unless otherwise requested.)</i>   |
| <input type="checkbox"/> Pre-registration for Next Term  | <input type="checkbox"/> Anticipated Graduation Date (AGD)<br><i>(Must specify if more than one degree is being pursued. Note that the AGD is calculated by minimum hours required for graduation for undergraduate students, expected program length for graduate students, or information provided as a result of the student's application for degree.)</i> |
| <input type="checkbox"/> Complete Enrollment History   |  |
| <input type="checkbox"/> Detail of All Degrees Conferred   |  |
| <input type="checkbox"/> Current University Rank<br><i>(Undergraduate programs only.)</i>  |  |
| <input type="checkbox"/> Please attach to the form provided – <b>Note: Virginia Tech will attach University Certification letter to the provided form.</b> |  |

Comments	
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**Delivery Preference**

<input type="checkbox"/> Please mail to the following address: <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> I will pick up this certification immediately.
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