

Verification of Student Status at Other Institution

HUMAN RESOURCES

DATE: _____
TO: Registrar, Institution _____
FROM: Human Resources – Records
RE: Name: _____
Department Number & Name: _____

In compliance with the Rules of the State Classified Personnel System and specific State Statutes, our office requires verification that the CSU employee listed above is a student at your institution.

Any questions regarding this procedure should be directed to the Records Section of the Human Resources Department, 555 S Howes Street Suite 213, Fort Collins, CO 80523, Phone (970) 491-7207.

Your cooperation is appreciated.

* * *

I certify that the above-named student is enrolled at:

Institution: _____

For the _____ term on a regular and continuing basis (at least half-time), in an established program of courses leading to a degree or certification.

Completed by: _____ Date: _____

Printed Name: _____

Title: _____

Institution: _____

Address: _____

Phone: _____