

## REQUEST FOR VERIFICATION OF DEGREE OR ENROLLMENT

### Yale School of Architecture Registrar's Office

180 York Street • PO Box 208242 • New Haven, CT 06520

Phone: (203) 432-2296 • Fax: (203) 432-6576 • Email: archregistrar@yale.edu

Requests typically take 3-5 days to process. Allow more time during high volume periods, such as at the beginning and end of each semester.

Name: \_\_\_\_\_ ID #: \_\_\_\_\_

*9 digits, starts with 9, see ID*

Date of Birth: \_\_\_\_\_ GradYear: \_\_\_\_\_

I am requesting:      Enrollment Verification      Degree Verification

#### Once complete\*:

*\*NOTE: Original documents include a raised seal, which is not visible on faxes or emails. The word (seal) will indicate where the seal appears on the original letter. If a raised seal is required, choose to pick up or mail the original.*

**Hold for pick-up at 180 York St. 3rd Floor**

Send via U.S. mail to: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Fax\* to: \_\_\_\_\_

*Name of recipient and fax number*

Email\* to: \_\_\_\_\_

*Name of recipient and email address*

#### Special Instructions:

*Please use this space to specify additional information.*

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My signature on this request serves as my consent to release non-directory information that may be requested on this form or on any attached form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_