

Request for Enrollment Verification – Bryan College

Enrollment verifications are usually requested by insurance carriers. Return completed form to the Registrar's Office, Mercer 202. *Please note that we cannot verify your enrollment until the semester in question has actually started.*

Student Name _____

First semester of attendance at Bryan: _____

Does your expected graduation date need to be included?

If so, expected date: _____

Signature of student: _____ Date: _____

Address or fax number verification needs to be sent:

