

GEORGE MASON UNIVERSITY ANTONIN SCALIA LAW SCHOOL

**ENROLLMENT VERIFICATION LETTER REQUEST
FORM**

PHONE: 703-993-8015 FAX: 703-993-8019 EMAIL: lwrecord@gmu.edu

Name: _____ G #: _____

Mailing Address: _____

Is this a new address: Yes ___ No ___ E-Mail: _____

Home/Cell Phone: _____ Work Phone: _____

Select Class Level:

Year Graduated/Last Attended: _____

Signature: _____ Date: _____

VERIFICATION LETTERS: Please select verification requested: GPA ___ Rank ___

Enrollment ___ Good Standing ___ Graduation ___ Credits ___

HANDLING INSTRUCTIONS: Select preferred method of delivery and specific

addressee, list below (Verifications will be sent to specific entities only not to students directly):

I will pick up in person ___ Place in my student mailbox ___ Mail to addressee below ___

Date Processed: _____