



Enrollment Verification

Official verification is available after the term's add/drop deadline. Processing takes 5–7 business days. Students should first try to obtain an enrollment certificate via the [National Student Clearinghouse](#). Loan deferments usually require a form from your loan company. Submit forms to [Registration and Academic Records \(registrars-office@mnsu.edu\)](#) or drop off at 132 Wigley Administration. Completed forms will be emailed to your MSU email unless otherwise directed. If mailing is required, provide a stamped, addressed envelope.

Student Information: Completed by the student prior to submission.

Last Name: _____ **First Name:** _____ **Middle Initial:** _____

Tech or Star ID: _____

Estimated Graduation Date (Self-reported by student): _____

Please verify the following information (check all the apply):

- ☐ Most recent term enrollment dates and status
☐ Specific enrollment dates, term/year, and status (please list dates): _____
☐ Pre-registration for upcoming term and status
☐ Cumulative Total GPA
☐ Other (please describe): _____

I authorize Minnesota State University Mankato to release the relevant academic information listed on this form.

Student Signature: _____

Verification Information: To be completed by Registration and Academic Records.

Enrollment Dates and Status

I certify that the student above was/is enrolled at Minnesota State University, Mankato as follows:

From:	To:	Enrollment Status:
_____	_____	<input type="checkbox"/> Full Time <input type="checkbox"/> Half Time <input type="checkbox"/> Less than Half Time
_____	_____	<input type="checkbox"/> Full Time <input type="checkbox"/> Half Time <input type="checkbox"/> Less than Half Time
_____	_____	<input type="checkbox"/> Full Time <input type="checkbox"/> Half Time <input type="checkbox"/> Less than Half Time
_____	_____	<input type="checkbox"/> Full Time <input type="checkbox"/> Half Time <input type="checkbox"/> Less than Half Time
_____	_____	<input type="checkbox"/> Full Time <input type="checkbox"/> Half Time <input type="checkbox"/> Less than Half Time
_____	_____	<input type="checkbox"/> Full Time <input type="checkbox"/> Half Time <input type="checkbox"/> Less than Half Time

Pre-Registration

This student is pre-registered for the term beginning on _____ and ending on _____.

Pre-registration status is: ☐ Full Time ☐ Half Time ☐ Less than Half Time.

Cumulative Total GPA: _____

University Signature: _____

Date: _____

Associate Director

Minnesota State University Mankato (Code: 002360)

Registration and Academic Records 132 Wigley Administration Center

Mankato, MN 56001

507-389-6266

University Seal