The University of Oklahoma Health Sciences Center

# **Enrollment and Degree Verification Request**

ephone Number

Person or Company Requesting Information (please print)					
Company Name			Contact Telephone		
		(	)		
Name of Contact		Title			
Last Name	First Name				

Oklahoma City, OK 73104-5036 Telephone (405) 271-2359

FAX (405) 271-2480

Office of Admissions and Records G. Rainev Williams Pavilion 920 Stanton L. Young Blvd

Steps:

WP 2410

**Process** 

- 1. Submit your request to the address listed above. 2. The Office of Admissions and Records receives enrollment and degree verification requests in person with the student's signature and with
- proper identification, by fax or by mail with the student's signature, and through the National Student Clearinghouse. Email requests are not accepted unless it is accompanied with the student's signature. 3. This form is available at the Office of Admissions and Records and on the official Office of Admissions and Records website.

Purpose of Request:

4. It is important that the student signs the release of his/her enrollment and degree verification in order to obtain an official release of his/her

- academic records and submit it accurately and completely to the Office of Admissions and Records for processing. 5. Enrollment and degree verification requests will be processed within five (5) business days of the receipt of the request.

\*Note: Disclosure of your Social Security Number is voluntary. If you consent to disclose your Social Security Number by including it on this form, it will be used for tracking purposes and to match your request with your educational records.

### FERPA Policy on Student's Access to their Educational Records: Based on the Family Educational Rights and Privacy Act of 1974 (FERPA), students have the right to view their education records wherever these

records are maintained on campus. Once a student has submitted a request to inspect his or her record, an institution must comply within 45 days. When the student has an outstanding financial or other hold on the record, the student will maintain the right to review his or her education record. He/She does not have the right to obtain copies unless failure to do so would effectively deny the student the right to inspect and review the record. Also, that student does not have the right to request a transcript sent to a third party until the obligation is fulfilled. Parental Access to Student Academic Records:

### Parent of a dependent student may have access to grades and other confidential academic information under guidelines provided in the Family

Educational Rights and Privacy Act of 1974. Access to this information is limited to parents who claim the student on their current income tax return.

atio	Student's Name (please pri	nt)		Student ID Number		Enrollment History		
Inform	Last Name	First Name	Middle			☐ Enrolled After 1984		
cation	Student's Name(s)			Date of Birth				
Identific	Former Last Name	Date Last Used (Year)	)			These records will need to be researched and will take longer to process:		
Student	Additional Instructions			Social Security Num	ber *	Lillolled Pilol to 1900		
Stu						☐ Enrolled 1960 – 1984		
	☐ Mail Enrollment and Degree Verification (provide exact name and address for mailing) ☐ Fax					x Enrollment and Degree Verification		

Identific	Former Last Name	Date Last Used (Year)			researched and will take longer to process:	
dent	Additional Instructions		Social Security Number *		☐ Enrolled Prior to 1960	
Stu					☐ Enrolled 1960 – 1984	
	☐ Mail Enrollment and Degree Verification (provide exact name and address for mailing)			☐ Fax	Enrollment and Degree Verification	
Mailing						
ž						

Authorizations and Signatures Date Parents Signature (if obtaining records through FERPA) Student Signature Date

## Administrative Use Only

Record Location Processed By Date Comments