

Registrar's Office: ph. 303-357-5845, 6399 S. Santa Fe Dr. Littleton, CO. 80120, registrar@denverseminary.edu, fax: 303-783-3122

Student Name: _____ Student ID: _____

Email: _____ Phone: (____) _____

The letter should contain the following information:

- Enrollment Status (Full Time/Half Time/Less-than Half Time)
- Number of Credit Hours Registered During _____ Semester (Please select a semester)
- Good Academic Standing
- Current Enrollment Degree Program and Concentration
- Date of Attendance
- Degree Awarded
- Graduation Date
- Current Address
- Other Information (Please Specify): _____

Letter Recipient Information
Send letter to the following address:

Email Recipient Information
Email letter to the following contact:

Institution or Company

Institution or Company

Person and/or Department

Person and/or Department

Street Address

Email Address

City State Zip Code

Hold Letter for Pickup in the Registrar's Office

Student's Authorizing Signature*: _____ Date: _____

*In accordance with the Family Educational Rights and Privacy Acts (FERPA) your signature is required to authorize the release of your information.

For Office	Date Received: _____	Date Processed: _____	Student Notified: _____
Use Only	Processed by: _____		