



UNIVERSITY of HAWAII®

MAUI COLLEGE

Verification of Enrollment Request

Student Information

Print Name: _____

UH Student ID: _____ Phone: _____

Student Signature: _____ Date: _____

Authorization Signature Required: I authorize release of information as directed on this Verification of Enrollment Request

Please complete only the items below that you need included in your letter of certification

Current Enrollment: _____
(Semester & Year and full-time, half-time, etc.)

Current Major: _____
(Major, Certificates, etc.)

Other: _____

(Degree Awarded, graduation date, past enrollment, etc.)

Additional Instructions

Check all that apply:

Mail letter to: _____

Fax To: _____ **Attn:** _____

Pick-Up Letter in Person

Letter to be picked up by third party (Additional approval and documentation required, please see instructions on reverse)

Letters are processed within two business days
Unclaimed or undeliverable items will be destroyed after 30 days
Please see reverse for additional information

Admissions & Records Office Use

Date Received: _____ Received by: _____

Date Completed: _____ Completed by: _____



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Authorization for Third-Party to Pick Up Official Documents

Part I: Student Information

Full Name: _____ Date: _____

Student UH ID: _____

Contact Email: _____ Phone #: _____

You may designate a third party to pick up your transcript, enrollment verification letter, or diploma at the Admissions & Records Office as long as our office receives a signed copy of this form and a copy of your photo ID prior to pick-up. Authorized third party must also present a valid photo ID at the time of pick-up.

Part II: Authorization for Third Party

I, _____, authorize _____
(print your name) (print third party name)

to pick-up my _____
(i.e transcript, enrollment verification letter, etc.)

Student Signature: _____ Date: _____

This form must be signed by the third party after they pick up the documents at our office

Third Party Signature: _____ Date: _____

Admissions & Records Office Use only

Verified by: _____ Date: _____