**Central Texas College**

**Request for Enrollment Verification**

**Use this form for the following request:**
- Military Identification Card Letter of Verification
- Letter of Verification for insurance purposes
- General Letters of Verification

**To Submit your Request for Enrollment Verification:**
- A valid photo ID must accompany each request.
- Please allow 48 hours for all requests. During registration please allow 72 hours.
- Enrollment will be verified only after the census date of all registered classes for the semester.

<table>
<thead>
<tr>
<th>If Faxing:</th>
<th>If Mailing:</th>
<th>If Emailing:</th>
</tr>
</thead>
</table>
| Fax: 254-526-1961  
Attn: Records & Registration | Mail to: Central Texas College  
Attn: Records & Registration  
PO Box 1800  
Killeen, TX 76540 | central.registration@ctcd.edu |

*NOTE:* All student loan verifications are processed through the Associate Dean/Systems Registrar's Office: (254) 526-1663  Fax: (254) 526-1542

Name: ___________________________  Home Phone: ___________________________
CTC ID: ___________________________  Cell Phone: ___________________________

Please select the following:
- Semester(s): Fall 20: ______  Spring 20: ______  Summer 20: ______
- Purpose of Verification:  
  - Military Identification
  - Other: ___________________________

Additional Information to be included in verification letter:
(Standard letters include: Full/Part Time Status, Dates of Attendance and Date of Expected Graduation)
- Freshman/Sophomore Status
- GPA
- Other: ___________________________

How would you like to receive this letter? Select one option

- [ ] Pick up
- [ ] Mail to: ___________________________
- [ ] E-mail to: ___________________________
- [ ] Fax to: ___________________________

Signature: ___________________________  Date: ___________________________

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- [ ] E-mail to: ___________________________
- [ ] Fax to: ___________________________

Signature: ___________________________  Date: ___________________________

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Rev 12/2019