

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.

If Faxing:

Fax: 254-526-1961
Attn: Records & Registration

If Mailing:

Mail to: Central Texas College
Attn: Records & Registration
PO Box 1800
Killeen, TX 76540

If Emailing:

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: _____