



Enrollment Verification Request

Registrar's Office
140 New Scotland Avenue
Albany, NY 12208
Fax: 518-292-7701
Email: registrar@sage.edu

A verification includes the following information for all semesters a student has been or is registered for:

- Beginning and ending dates.
- Number of credits attempted and completed.
- Full-time or part-time student status.
- Undergraduate or graduate level.

Verifications also include:

- The last term the student was enrolled.
- The student's degree program.
- The student's anticipated completion date.
- Degrees earned from The Sage Colleges with graduation date(s).
- Signature of Authorized Official

Please print:

Name: _____ School ID# or Last four of SSN: _____

Address: _____

Phone: (____) _____ Alternate Phone: (____) _____

Any Information you would like verified that is not listed above:

CHECK ALL THAT APPLY:

Email to: _____ Email Address: _____

Fax to: (____) _____ - _____ Attn: _____

***IF FAXING FOR LOAN DEFERMENT, PLEASE ALSO PROVIDE A MAILING ADDRESS ***

Mail to (PLEASE print full address):

Verifications cannot be processed without the student's signature.

Student's Signature: _____ **Date:** _____

There is a 3 - 5 business day turn-around time for verification requests to be processed. Requests are processed in the order in which they are received. If there is an immediate need for a verification, verifications can be obtained instantaneously at www.studentclearinghouse.org.