



STUDENT VERIFICATION REQUEST FORM

921 S. 8th Ave, Stop 8196
Pocatello, ID 83209-8196
208-282-2661 FAX 208-282-4231
Email: verify@isu.edu

Requests can be mailed, emailed or submitted in person to the Registrar's office.

Normal processing time is 3-5 business days. (There is currently no charge for this service.)

Completed requests can be mailed/emailed/faxed or picked up by the person they are issued to.

Idaho State University, in compliance with the Family Education Rights and Privacy Act (FERPA) is responsible for protecting and maintaining the privacy of student records and judiciously evaluating requests for release of information from those records. In signing this release form you are authorizing the ISU Office of the Registrar to release personal, identifying information including but not limited to: class schedules, number of credits, and expected graduation date.

Student Name \_\_\_\_\_ ID# \_\_\_\_\_

Student Phone Number \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Please select the enrollment information to be verified and method you would like us to use to respond.

In-School Deferment for Student Loans
Expected graduation date \_\_\_\_\_ (Month & Year)
Name/Address/Email of Student Loan Company:
\_\_\_\_\_ or Pick up: [ ]
\_\_\_\_\_

Degree Verification
Name/Address/Email where information is to be sent:
\_\_\_\_\_ or Pick up: [ ]
\_\_\_\_\_

Current Enrollment
Name/Address/Email where information is to be sent:
\_\_\_\_\_ or Pick up: [ ]
\_\_\_\_\_

Additional comments or requests:

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