



DAVIS
APPLIED
TECHNOLOGY
COLLEGE

A UCAT CAMPUS

Enrollment Verification Form

Send Enrollment Verification Requests to:

Davis Applied Technology College
Enrollment Verification
550 East 300 South
Kaysville, UT 84037
Telephone: (801) 593-2332
Fax: (801) 593-2400

♦Please allow 3-5 days processing time

Student Information Please check this box if the following information has changed.

Student ID or Social Security Number			Today's Date		
Name (please print) Last		First	Middle	Former Name: (if applicable)	
Street Address		City	State	Zip Code	
Telephone Number		Date of Birth		Email Address	
Program(s) Enrolled In:			Dates of Attendance:		
Enrollment Status: <input type="checkbox"/> Half-Time (12-15 hrs/ week) <input type="checkbox"/> Three-quarters Time (16-23 hrs/week) <input type="checkbox"/> Full Time (24-30 hrs/week)			<input type="checkbox"/> Include Anticipated End Date Check this box if you are currently enrolled and would like the verification letter to include your anticipated end date.		

Recipient of Records

Delivery Method: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Pick-up Fax Number: _____ Attention: _____					
Name of Organization: (If more than one address, please attach a list)			Attention:		
Street		City	State	Zip Code	
Please include any special mailing instructions for this request form:					

Signature: (required to process request)

Office Use Only

Received On: _____ By: _____ Processed On: _____ By: _____