



UNIVERSITY OF
MARY HARDIN-BAYLOR
EDUCATION FOR LIFE... EXPERIENCE OF A LIFETIME

Enrollment Verification/Statement of Standing

Name: _____ ID#: _____

Address: _____

Phone #: _____

Student's Signature: _____ Date: _____



Registrar's Office Use Only

This is to certify that the student above is/was:

1. Enrolled during the academic periods:

Fall Semester Spring Semester Summer Semester
 from ____ - ____ - ____ to ____ - ____ - ____.
 Full time: ____ semester hours
 Half time: ____ Semester hours

Fall Semester Spring Semester Summer Semester
 from ____ - ____ - ____ to ____ - ____ - ____.
 Full time: ____ semester hours
 Half time: ____ semester hours

2. Currently in good standing. Yes No

3. Current Degree: _____ **Major:** _____ **Minor:** _____

4. Estimated Graduation Date: Fall ____ (year) Spring: ____ (year) Summer: ____ (year)

Authorized Official: _____ Date: _____

Title of Authorized Official: _____

University of Mary Hardin-Baylor FICE Code: **003588**
 Accredited by the Commission on Colleges of the Southern Association of Colleges and Schools