

## VERIFICATION OF ENROLLMENT

NOTICE: The school will contact you if we are unable to process your request due to your failure to comply with one or more of the school policies and procedures as listed in the school catalog. A verification of enrollment will be sent to your address within 10 business days. You may contact the Student Services Office at (562) 864-0506 with any questions. Please mail (15141 Whittier Blvd., Suite 420, Whittier, CA 90603, fax (562-864-7806), or email (julie@ati.edu) the completed form.

**Note:** Please allow 5 to 10 working days to process your request.

### Student Information

Last name:	First name:	Middle name:
Home Address:		
Home City, State, Zip:		
Home Phone with Area Code:	Date of Birth (mm/dd/yyyy):	
SEVIS ID# (if any):		
Student's Signature:		
Requesting to receive a verification of enrollment letter at home?	Yes	No (please complete the Institutional Information Section)

### Academic Program Information

Program Name:
Academic Period (mm/dd/yyyy to mm/dd/yyyy):

### Alternate Mailing Address / Institutional Information

School:
Attention:
Address:
City, State, Zip:

### For Office Use Only

Request received by (school official last, first name – print):
Date request received (mm/dd/yyyy):
Date request filled (mm/dd/yyyy):