

REQUEST FOR CERTIFICATION SERVICES OFFICE OF THE UNIVERSITY REGISTRAR

Allow 2 business days processing time.

For current students and students who have left the University within the last 18 months, after you log into Bannerweb. https://bannerweb.richmond.edu, go to "Student Services" and "National Student Clearinghouse" to complete the certification. For all others, please fill in the form and submit the completed form to the Registrar's Office.

SPECIAL INSTRUCTIONS FOR REGISTRAR'S OFFICE SUBMISSIONS please check: STUDENT'S SSN: Student must sign and date "Student's GPA: Student must sign and date "Student's Signature" GROUP NUMBER OR INSURANCE PLAN NUMBER: Please pro OTHER:	s Signature" section bel " section below. wide this information.	low.	
Requestor: Student or Parent / Third Party (nam	ne)		
Student ID# (or last 4-digits of SSN)Student Email	Dai Studer	Date	
Requester Phone # (if requestor is not student)		ter none "	
* Name as used at the University of Richmond (if changed)	FIRST	MIDDLE	
I hereby request the following Certification(s): (please cl	heck)		
Verifications: Enrollment for a given semester, Specify semester	Forms: (please attach, if applicable) Employment-related form Automobile Insurance form Health Insurance form Loan Deferment form Sibling Enrollment form Other (please specify)		
Email certification to			
Mail certification toStreet Address			
City Hold for pick up (You may pick up your certification(s) a	State	Zip	
Fax certification to (); A'			
Student's Signature By signing this request, I authorize the University of Richmond to		DateSSN to the party or parties listed above.	
RETURN COMPLETED REQUEST IN PERSON, BY MAIL, BY FA (ONLY PDF or JPG FILES OF THIS FORM WILL BE ACCEPTED Office of the Registrar 142 UR Drive University of Richmond, VA 23173		For Office Use Only Date Processed Initials	

FAX (804) 287-6578 • EMAIL registrar@richmond.edu