## **Enrollment Certification Request**

## The University of Texas Health Science Center at Houston

Office of the Registrar
P.O. Box 20036 - UCT2250, Houston, TX 77225
(713)500-3388 Fax: (713)500-3356

The University of Texas Health Science Center at Houston has authorized the National Student Clearinghouse to provide enrollment verifications for its students and degree verifications for its alumni. We no longer provide verifications by phone or fax. The link for the National Student Clearinghouse is: www.degreeverify.org

Mail: National Student Clearinghouse, 2300 Dulles Station Blvd, Suite 3000, Hendon, VA 20171

## Instructions:

PLEASE PRINT or TYPE the information requested. Return to the Office of the Registrar at the address listed above.

**Note**: Certification of upcoming enrollment will not be processed prior to the initial payment for that term.

PRINT Last Name, First Name, Middle Name	Student ID Number or SSN
PRINT School Term(s) needing certification	— Select the appropriate school:
Transfer School Territis, needing certification	☐ School of Dentistry
	☐ Graduate School of Biomedical Sciences
PRINT Anticipated graduation date	☐ Medical School
	☐ School of Nursing
	☐ School of Biomedical Informatics
Permission to include SSN on certification: $\Box$ - Yes $\Box$ - No	☐ School of Public Health
Permission to include Student ID on certification: □ - Yes □ - No	☐ MD Anderson School of Health Profession
	☐ UT HSC at Tyler
Send the above information to ( <b>PRINT</b> ):	
1. 2.	
Student's Signature	Date

