

HUMAN RESOURCE SERVICES MANUAL
SECTION 11: FORMS AND RELATED INSTRUCTIONS – NON-STUDENT HOURLY

Verification of Student Status at Other Institution



Human Resource Services
Ft. Collins, CO 80523
Phone: (970) 491-7207
Fax: (970) 491-2443

DATE: _____

TO: Registrar, Institution _____

FROM: Records Section, Human Resource Services Department

RE: Verification of Student Status for SSN: _____

Name of student/employee: _____

Home Dept. Number, Name: _____

In compliance with the Rules of the State Classified Personnel System and specific State Statutes, our office requires verification that the CSU employee listed above is a student at your institution.

Any questions regarding this procedure should be directed to the Records Section of the Human Resource Services Department, 555 S Howes Street Suite 204, Fort Collins, CO 80523, Phone (970) 491-7207.

Your cooperation is sincerely appreciated.

* * *

I certify that the above-named student is enrolled at

Institution: _____

for the _____ term, on a regular and continuing basis (at least half-time), in an established program of courses leading to a degree or certification.

Completed by: _____ Date: _____

Printed name: _____

Title: _____

Institution: _____

Address: _____

Phone: _____