



Phone: (501) 916-3110
 Fax: (501) 916-3168
 Email: records@ualr.edu
 2801 South University Avenue
 Little Rock, AR 72204

Academic Verification Request

For current students please log into BOSS boss.ualr.edu go to "Student Services", "Student Records" and "NSC Student Self-Service" to complete the certification. For all others, please fill in the form and submit the completed form to Records and Registration.

SPECIAL INSTRUCTIONS FOR OFFICE SUBMISSIONS: If you need the following added to your certification(s) please check:

Student's SSN _____ Semester GPA _____

Other _____ Cumulative GPA _____

Requester: Student Parent/Third party (name) _____

Note: Third parties must request verifications from the National Student Clearinghouse at degreeverify.org.

Student ID# or SSN _____ Student Status: Current Student Former Student

Student Email _____ Requester Phone No. _____

Student Name (First, Middle, Last)

Previous names used at UA Little Rock (if changed): _____

I hereby request the following Certification(s): (please check)

Verification Type:

Enrollment Verification Term _____ Letter of Academic Standing

Degree Verification Letter of Non-Attendance

Expected Graduation Date (please provide date) _____

Delivery Options:

Hold for Pick-up (Valid Photo ID Required) Mail Verification To: _____

Fax Verification: Fax # _____

Student's Signature _____ **Date** _____

By signing this request, I authorize the UA Little Rock to release my GPA and/or SSN to the party listed above.

All financial obligations to UA Little Rock must be met before Academic Verifications will be issued.

For Office Use Only	
Date Processed:	Processed By:
Date Picked Up:	Processed By:
Date Mailed:	Processed By:
Date Faxed:	Processed By: