



Victor Valley College Enrollment Verification Request Form

Please Note: Processing time required is 3 to 4 business days.

- *No verification will be furnished until all financial obligations to the College are satisfied.*
- **All fees for the current semester must be paid before verification will be issued.**

Name _____

Student ID # _____ Phone No. _____

Semester of Verification: Fall Winter Spring Summer

Year _____

Reason for Verification: Medical Insurance Good Student Driver
 Training Verification Other (Explain below)
 Loan Deferment (once completed, VVC mails directly to lender.)

Choose One:

Form Attached or Need a letter

Delivery of Method: Email to: _____

Hold for Pickup or Mail to: _____
(Name) _____

(Street)

(City, State, Zip)

What information is to be included (Be Specific): _____

Date _____

Student Signature _____