



## Student Enrollment Verification / Academic Achievement Form

Please provide student enrollment information specific to the University, Community College, Trade School or other institute of continued learning.

### Student Information

Student Name	Student Identification Number
Address	Contact Phone Number
Level of Student (freshman, sophomore, junior, senior, graduate, etc.)	Cumulative Grade Point Average

### Educational Institution Information

School Name	Contact Name
Address of School	Contact Phone Number

### Educational Institution Information

Institution Authorized Name (print)	Title
Authorized Signature	Date
Student Signature	Date

Please attach a copy of your current transcript or other documentation from your school in support of your current academic status. If you have not yet completed a full semester or term, attach a current course listing and a verification of classroom progress.

Return completed form to:  
Michigan Information Systems Association (MISA)  
P.O. Box 493  
Dimondale, Michigan 48821