

Enrollment Verification Request Form

Name:		Stude	Student ID:		
Please verify the following: ☐ Full-time Student		Indicate the semester and year to be verified:			
	Part-time Student Part-time Student Cumulative GPA Academic Standing Anticipated Graduation Date Letter of Non Attendance		Fall Spring		
			Summer		
If add	ditional information is needed please spe	cify below.			
	☐ I would like the letter emailed to:				
	I would like the letter faxed to following:				
	Institution:				
	Person:				
	Fax Number:				
	I would like the letter mailed to the following address:				
Sign	ature:		Date:		

Bossier Parish Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate degrees, diplomas, and certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Bossier Parish Community College. *Bossier Parish Community College does not discriminate on the basis of race, color, national origin, gender, age, religion, qualified disability, marital status, veteran's status, or sexual orientation in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of its operations. Bossier Parish Community College does not discriminate in its hiring or employment practices. *Coordinator for Section 504 and ADA: Angie Cao, Student and Disability Services Specialist - Disability Services, F254, 6220 East Texas Street, Bossier City, LA 71111 - (318) 678-6511 - acao@bpcc.edu. - 8:00 a.m.—4:30 p.m. M-F, excluding holidays and weekends. *Equity/Compliance Coordinator: Teri Bashara, Director of Human Resources - Human Resources Office, 6220 East Texas Street, Bossier City, LA 71111 - (318) 678-6056 - 8:00 a.m.—4:30 p.m. M-F, excluding holidays and weekends.