

RIO HONDO COLLEGE

Admissions & Records Office (562) 908-3415
3600 Workman Mill Rd., Whittier, CA 90601-1699

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Student ID #

Print Last Name _____ First _____ Middle _____

Address _____ City _____ State _____ Zip _____

Other Names Previously Used _____ Birthdate _____ Phone Number _____

Student's Signature (Signature authorizes release of information) _____ Date _____

NOTE: First two documents ever processed are free. Additional copies are \$3.00

PLEASE NOTE: Applicant is responsible for correct mailing address. Print clearly within the space below for mailing in a window envelope. **ONE ADDRESS PER FORM.**

NAME _____

DEPARTMENT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

VERIFICATION OF ENROLLMENT REQUEST*

* Verifications for current/future semesters WILL NOT BE PROCESSED until the day AFTER "Last Day to Add" for that semester.

Choose semester:

___ Fall Year _____

___ Spring Year _____

___ Summer Year _____

Form Attached

Comments: _____

_____ Number of copies requested

FOR OFFICE USE ONLY:

Fee _____ Date _____

I.D. Verified and Rec'd by: _____