

ENROLLMENT VERIFICATION FORM

Enrollment verification letter details the period of enrollment for a student currently attending Faulkner University. This letter is used for the following verification: car insurance, employment, health insurance and scholarships.

Student Name: _____ ID#: _____

MAIL _____ or FAX _____

Mail to: _____

Attention: _____

Policy or Contract #: _____

Address: _____

City, ST, Zip: _____

FAX#: _____

Student's Signature: _____ Date: _____

Due to the high volume of request forms, please allow three (3) business days in order to process. Thank you for your cooperation.

Registrar's Office
Faulkner University
5345 Atlanta Highway
Montgomery, AL 36109

334-386-7244 (FAX)

For more information, call 334-386-7240 or 1-800-879-9816 ext. 7240