Grade Verification Form

Please fill out the following form to request a grade verification letter to be faxed or emailed to an employer. The verification letter will be faxed or emailed back within one to two business days.

Name: _____________________________________________________________________________

Address: _____________________________________________________________________________

City: ______________________________________________________________________________

State: ______________________________________________________________________________

Phone Number: ____________________________

Employer: __________________________________________________________________________

Semester: Fall ___  Spring ___  Summer 1___  Summer 2___  20____

Course Number and Description:
____________________________________________________________________________________
____________________________________________________________________________________

Fax number or email address for verification to be sent:
____________________________________________________________________________________

Student’s Signature ________________________________________________________________

Date ______________________________________________________________________________

Please fax or email form back to 781-768-7071 or email it to lauren.gonzalez@regiscollege.edu

Revised 5/17/2010