

**Austin Peay State University**

**Office of the Registrar**

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Ellington Building; Room 316

**Please Allow 2-3 Business Days  
for processing**

# Enrollment Verification Request Form

Print this form, complete it, and return- See information above

Name \_\_\_\_\_ Student ID \_\_\_\_\_

Semester to be verified \_\_\_\_\_ Expected Date of Graduation \_\_\_\_\_

Specify how to send and provide the needed information:

Mail: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Pick up: You may pick up in two working days in Ellington Building, room 316

Number of copies \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

--revised 03/03/2022