## **CUNY SCHOOL OF LAW**

## **Request For Certification of Enrollment/Degree/Good Standing Letter**

Name:	
Last	First MI
Date of Birth:	CUNYfirst ID:
Street Address:	Apt. No.:
City:State:	Zip Code:
Telephone: Day – ()	Evening – ()
Are you currently enrolled:  Yes No Please check what letter(s) you are requesting:	
<ul> <li>☐ Current Enrollment</li> <li>☐ Good Standing Letter</li> <li>☐ Graduation Letter (Includes the degree of the control o</li></ul>	gree awarded and graduation date)
Would you like your letter to reflect your expe	ected graduation date?   Yes   No  If yes, expected Graduation Date
Do you want to pick up this letter?	es
Name and address of recipient:	
Name:	
Address:	
City: State:	Zip Code:
Signature (required)	