

Enrollment Verification Request

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

Date: [Date]

[Recipient's Name]
[Recipient's Title]
[Institution Name]
[Institution Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to request verification of my enrollment at [Institution Name] for the purpose of [explain purpose, e.g., an application process]. My details are as follows:

Name: [Your Full Name]
Student ID: [Your Student ID]
Program of Study: [Your Program]
Enrollment Period: [Start Date] to [End Date]

Please let me know if you require any additional information to process my request. I appreciate your prompt assistance in this matter.

Thank you for your attention to this request.

Sincerely,
[Your Name]