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 Registrar's Office  
 Griz Central Registration Counter  
 The University of Montana  
 Missoula, MT 59812

**Verification for Enrollment Form**  
 (Information to be Released)

DATE: \_\_\_\_\_ STUDENT IDENTIFICATION NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
 \_\_\_\_\_ (Please Print)

TELEPHONE NUMBER: \_\_\_\_\_

TERM(S)	AUTUMN/YEAR	SPRING/YEAR	SUMMER/YEAR
Please check the appropriate term and enter the year.			

LIST OTHER INFORMATION YOU ARE REQUESTING HERE: \_\_\_\_\_



(Example: Full-Time, Part-Time, Good Student Discount, Degree Verification, etc.)

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