



Rockland Campus Registrar Nyack College 1 South Blvd Nyack, NY 10960 (845) 675-4734 (845) 353-1297 (fax)

Rockland Campus OM Registrar Nyack College 1 South Blvd. Nyack, NY 10960 (845) 675-4464 (845) 358-0644 (fax)

Rockland ATS Campus Graduate Registrar Nyack College 350 N Highland Ave Nyack, NY 10960 (845) 770-5766 (845) 348-3918 (fax)

New York City Campus Registrar Nyack College 2 Washington Street New York, NY 10004 (646) 378-6192 (917) 237-0399 (fax)

Request for Enrollment Certification

Complete this form and return it to the Registrar's Office

Name: _____ ID#: _____

Semester(s) to be certified:

FALL _____ YEAR SPRING _____ YEAR SUMMER _____ YEAR

Please select the information to be certified from the list below:

- Enrollment Status Degree Program Graduation Date Anticipated Date of Graduation Other: _____

Please list the name and address, or fax number, of the individual or organization that is to receive this certification:

TO: _____ NAME: _____ ADDRESS: _____

FAX NUMBER (if applicable): _____

I authorize Nyack College | Alliance Theological Seminary to release the information indicated to the above address.

Student: _____ Date: ____/____/____