STATE OF MICHIGAN/MACRAO

College/University Standard Enrollment Certification

The Michigan Association of Collegiate Registrars and Admissions Officers certification is designed to expedite the reporting of pertinent and timely academic record information. We appreciate your accepting this certification in lieu of completing a form that may have been provided.

TO BE COMPLETED BY STUDENT

Print Name: Last _____ First _____ MI _____

SOC. SEC. NO.:_____ I.D. NO.:_____

INFORMATION TO BE VERIFIED MUST BE ENTERED BELOW:

- **List Current Sem./Term and Year to be verified: _____ Dates: _____ to _____**
  month/yr. month/yr.
- **Semester/Term hours currently registered _____**
- **Degree program/major _____**
- **Anticipated date of graduation _____**
- **Honor/Grade point average _____**
- **Other _____**

I authorize the institution listed above to release the verified information requested above

_____ _____/ _____/ _____

Student Signature Date

PRINT CLEARLY

Send Certification To:

NAME _____

ATTN _____

ADDRESS_____

CITY/STATE _____ZIP_____

TO BE COMPLETED BY INSTITUTION

JACKSON COMMUNITY COLLEGE
Registration/Records Office
2111 Emmons Road
Jackson, MI 49201
Federal Code 002274

KEY TO ENROLLMENT STATUS:

☐ Full-time ☐ Less than half-time
☐ At least half-time ☐ Not Enrolled
☐ No record found

Comments: _____

_____

_____

_____

The institution seal is affixed on official certifications.

_____

Registrar
JACKSON COMMUNITY COLLEGE

_____ _____

Completed by Date