



Enrollment Center

1600 E. Golf Rd., Des Plaines, IL 60016, 847.635.1700, Fax 847.635.1706

7701 N. Lincoln Ave., Skokie, IL 60077, 847.635.1400, Fax 847.635.1497

Enrollment Verification Form

Please print all information. One form per request.

A letter will be issued only if a student's account is clear of outstanding balances. Oakton does not rank students.

Name _____
Last First MI Maiden

Address _____ City _____ State/Zip _____

Student ID No. **B** _____ Date of Birth _____

Phone (____) _____ (____) _____
Home Work

Enrollment Verification: ___ Fall ___ Spring ___ Summer Year 20_____

Check the appropriate box.

Will pick up letter ___ Des Plaines Campus ___ Ray Hartstein Campus (Skokie)

Mail my letter when available.

Complete attached form

Special request for information on letter: _____

Send letter to:

Check here if mailing address same as above.

Name _____

Address _____

City _____ State/Zip _____

Student authorization for release of enrollment verification:

Signature of Student

Date

If you wish to authorize another person to pick up your letter, indicate their name below.

You and other authorized persons must bring a photo ID in order to pick up the enrollment verification.

Name _____ Relationship _____

Signature of person authorized for pickup

Date