



**INSTRUCTIONS**

Complete the "Student" portion of this form and return to the Registrar's Office with a copy of a photo ID (the ID may be scanned separately or onto this document, as a PDF or you can take a picture, if you choose to email). You may drop the documents off in person, fax them to 407-823-5022, or email them to either [Deborah.George@ucf.edu](mailto:Deborah.George@ucf.edu) OR [Vanessa.Butts@ucf.edu](mailto:Vanessa.Butts@ucf.edu). Illegible forms will not be processed.

**STUDENT INFORMATION**

Name (any current or prior name while attending UCF) \_\_\_\_\_

Current Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_

**STUDENT VERIFICATION**

Please answer at least **ONE** of the following and include your ID in the box below:

- What was your first major? \_\_\_\_\_
- When did you begin taking classes at UCF? \_\_\_\_\_
- Which term did you withdraw from UCF? \_\_\_\_\_
- Where did you live while attending UCF? \_\_\_\_\_
- What was the major for you degree from UCF? \_\_\_\_\_
- What were your classes from your last term here at UCF? \_\_\_\_\_

*Place state/government-issued photo ID here. Scan or take a photo of the completed form and email it to the email addresses included in the instructions at the top of this form.*

**SIGNATURE**

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

**REGISTRAR'S OFFICE USE ONLY**

Processed By \_\_\_\_\_

Date \_\_\_\_\_