



Office of the Registrar  
 Wille Administration Building, Room 102  
 160 Convent Avenue  
 New York, New York 10031  
 T: 212-650-7852/7853 / F: 212-650-6108  
[registrar@ccny.cuny.edu](mailto:registrar@ccny.cuny.edu)

**REQUEST FOR CERTIFICATION LETTER**

\_\_\_\_\_  
 \*Student ID    \*Last Name    \*First Name    MI

\_\_\_\_\_  
 @CITYMAIL.CUNY.EDU    \_\_\_\_\_  
 CITYmail    Personal E-Mail

Are you currently enrolled:     Yes     No    Date of Birth: \_\_\_/\_\_\_/\_\_\_

Dates of Attendance:                          FROM: (MM/YY) \_\_\_/\_\_\_                          TO: (MM/YY) \_\_\_/\_\_\_

**\*I am requesting the following letter(s):**

Current Enrollment                          Includes current semester of attendance, your academic plan, units in progress, (3/4 business days to process)                          and start and end dates of the current semester.  
**(BURSAR BILL MUST BE PAID)**

Do you want your expected date of graduation included?     Yes     No

Semesters Enrolled                          Includes all semesters of enrollment and units taken, your academic plan, and (3/4 business days to process)                          start and end dates of each semester.

Do you want your expected date of graduation included?     Yes     No

Letter of Excess Credits                          Includes number of credits earned in excess of degree requirements. (4/5 weeks to process)                          **(MUST HAVE GRADUATED)**

When did you graduate?                          Date: (MM/YY) \_\_\_/\_\_\_

Undergraduate                           Graduate

Graduation Letter                          Includes type of degree awarded and conferral date. (3/4 business days to process)                          **(MUST HAVE GRADUATED)**

When did you graduate?                          Date: (MM/YY) \_\_\_/\_\_\_

**\*Do you want to pick this letter up?**                           Yes     No

If the attendance letter is not picked up within **7 business days** of completion, it will be mailed to the address below.

**\*ADDRESS:** \_\_\_\_\_

\_\_\_\_\_  
 Street    City    State    Zip

**\*Today's Date:** \_\_\_/\_\_\_/\_\_\_                          **\*Student's Signature:** \_\_\_\_\_

If there is a **BURSAR STOP** on your record, **WE WILL NOT** be able to honor your request. JT11/16/17