

Certification Request Form

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GW ID

Email: _____

Phone: _____

_____/_____/_____
LAST NAME FIRST NAME M.I.

- ▶ The Records Office **does not** provide unofficial/official transcripts. Please make transcript requests with the University Registrar.
- ▶ The Records Office is *not* permitted to process forms for: CA, CO, CT, MD *Pre-Legal*, ME, NM, TX *Certification of JD*, and VI. For these forms, contact the University Registrar (Colonial Central 800 21st Street, Marvin Center Ground Floor).
- ▶ The Records Office can process select NY forms. For inquiries about which NY forms go to the Records Office, and which NY forms go to the University Registrar, please contact the Records Office.
- ▶ For IL and MA bar forms, please indicate your undergraduate degree, date awarded, and institution name in the notes section.
- ▶ Requests will be completed in approximately four business days, but will take longer during high-volume times including the beginning of the semester and the period following spring commencement. Certain requests, such as character fitness or forms that must be sent to another department, may take longer to complete.

REQUEST FOR:

- LETTER OF GOOD STANDING
- STATE BAR FORM (MUST PROVIDE FORM)
- STATE BAR LETTER (SPECIFY STATE) _____
- OTHER LETTER/FORM _____

NOTES:
Please detail what needs to be included in the certification

INSTRUCTIONS:

- WILL **PICK UP** IN THE RECORDS OFFICE
- FAX TO: _____
- MAIL OR EMAIL TO ADDRESS BELOW:

(Address must be provided even if on attached documents.)

Student's Signature
By signing this request, I authorize the George Washington University to produce a Letter of Certification verifying the information requested above. By choosing to have my certification faxed or emailed, I understand that confidential information may not be transmitted securely and I agree to release the Records Office from any and all liability.

Date