



NSMMS & CRASTE 2024 | Full-Time Student Verification Form

Instructions: Please fill out the information below. This must be signed by an individual in your Office of Student Admissions or your Graduate Advisor. Return a scanned copy ASAP.

STUDENT / ATTENDEE INFORMATION

(Student Name)

(University)

(Degree & Major)

(Name of Student Advisor)

Will you be enrolled as a student or conducting research during the 2024 summer semester/quarter? (check one)

YES

NO

ADVISOR / ADMINISTRATOR VALIDATION

By signing this form, I hereby certify that the individual listed as entered above is a full-time student in good academic standing working on the degree and major listed above.

(Full Name, Department – Print)

(Signature)

(Date)