



KERNEL UNIVERSITY

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- REQUEST FOR** **VERIFICATION OF ENROLLMENT (VE)** **TRANSCRIPT (TR)**
 CERTIFICATE OF GRADUATION (CE) **STUDENT ID CARD (SID)**
 REFERENCE FOR EVIDENCE (RFE) **I-20 REPRINT**

Please complete this form and remit to the office of Admissions and Records along with the processing fee.

Student Name: _____ Student ID: _____

Date of Birth: _____ / _____ / _____ Phone: (_____) _____
mm dd yyyy

- Program: Bachelor of Theology (B.Th) Master of Divinity (M.Div) Doctor of Ministry (D.Min)
 Business Administration (BSBA)

Delivery or Pick-up Method (Select one)

- I request my official records to be released to the following school/institution (Or mail to the address below).

Address: _____

- I authorize _____ to pick up my records.

- I will pick it up. Pick-up Date: _____ / _____ / _____
mm dd yyyy

Payment Information

- Visa Master American Express Card Number: _____ CVV: _____

Name on Card: _____ Expiration date: _____ / _____ (mm/yy) Zip Code: _____

Items	# of Copies	Method		Subtotal
Transcript		Regular*/ Rush**	\$20.00 / \$50.00	
Enrollment		Regular / Rush	\$20.00 / \$50.00	
I-20 Reprint		Regular / Rush Enrolled St. / others	\$20.00 / \$50.00	
RFE (Reference For Evidence)		Regular	Present Enrolled Student: \$100.00 Others: \$200.00	
Student ID Card (Re)		Regular	\$20.00	
Graduation		Regular / Rush	\$20.00 / \$50.00	
Payment History		Regular	\$50.00	
Mailing (No Tracking # / Tracking#)		\$20.00/\$50.00	Total Amount	

Regular*: 5 business days, Rush**: 1 business day, Express***: Overnight

I hereby authorize an official copy of my school transcript to be released by Kernel University.

Student Signature

Date