



**NORTHWEST**  
NAZARENE UNIVERSITY

## **Letter of Degree Completion**

### **Information required for verifications:**

Signed release from student  
Name of student  
Address and phone number  
NNU Student ID number or Social Security number  
To whom and where to send verifications

### **Contact person:**

Esther Read – Verifications Officer (208) 467-8433

Send inquiries to: Registrar's Office  
Northwest Nazarene University  
623 S. University Boulevard  
Nampa, ID 83686  
E-mail: [registrar@nnu.edu](mailto:registrar@nnu.edu)  
Fax: (208) 467-8603



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## VERIFICATION OF DEGREE COMPLETION

Student ID: \_\_\_\_\_

Student SSN: \_\_\_\_\_

First Name

Middle Name

Last Name

Address

Presently Enrolled? ☐ YES ☐ NO

City, State, Zip

\*

Telephone

Verification letter is to be: ☐ Picked up ☐ Mailed ☐ Faxed ☐ E-mailed

***Please allow 48 hours for verification to be processed.***

Send verification letter (s) to: \_\_\_\_\_ (Please print clearly. Enter complete name and address if letter is being mailed.)

Name: \_\_\_\_\_ FAX # or Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_