



NORTHWEST
NAZARENE UNIVERSITY

Letter of Non-Attendance Request

First Name:

Middle Name:

Last Name:

DOB:

Student SSN:

Street Address:

City / State / Zip Code (Postal Code):

Telephone:

Verification letter is to be:

☐ **Picked up** in person (at the Office of the Registrar)

☐ **Emailed** (include email address and full name of *recipient*):

Name:

email address:

☐ **Faxed** (include fax number and full name of recipient):

Name:

fax number:

☐ **Mailed:** (include address and full name of *recipient*):

Name:

Street Address:

City / State / Zip Code (Postal Code):

Student Signature

Date