

Revelle College • Dean of Student Affairs Office
University of California, San Diego
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Date Received (For Office Use):

DEAN'S CERTIFICATION / RECORDS CHECK REQUEST FORM

*Dean's Certifications take approximately 10 business days to complete.
Requests will be valid for one year from the date this form is signed.
Please include a stamped envelope if applicable.*

Name: Last Name First Name Middle Name

PID: A Date of Birth: Month Day Year

Phone Number: Email Address:

Dates of Attendance at UCSD: Quarter, Year to Quarter, Year

Institution/Program requesting certification:

Name of Institution/Program

Street Address

City

State

Zip Code

Please check where applicable:

UCSD Global Seminars Judicial Affairs Form

Graduate School Disciplinary Record Form

For Employment Verification Purposes

Self

Other:

This document confirms my consent to the disclosure of confidential information from my student records that may otherwise be restricted from disclosure as provided by the Family Educational Rights and Privacy Act (FERPA) and UC/UCSD Policies by the Revelle College Dean of Student Affairs Office at the University of California, San Diego to the Institution/Program named above.

Signature

Date

.....
For Office Use:

Records Check Completed By: _____
Full Name of Staff Member

Discipline Files: Yes No

Date of mailing or pick -up: _____

Notes: _____