



MENLO COLLEGE

Office of the Registrar

1000 El Camino Real

Atherton, CA 94027

650-543-3737 (phone)

650-543-4103 (fax)

INFORMATION REQUEST FORM

Use this form to request information from the Office of the Registrar. Please be detailed about the information that you need verified. Some requests may not be able to be processed- you will be contacted if this is the case. Allow 1-3 business days (24-72 hours) for the Office of the Registrar to process your request.

(PLEASE PRINT NEATLY AND USE INK)

Name: _____
First Name Middle Name Last Name

Student I.D. Number: _____ Phone Number: _____

Email Address: _____

Current Mailing Address: _____

I AM REQUESTING THE FOLLOWING:

I will pick up at the Registrar's Office: _____ (CHECK HERE IF PICKING UP)

OR

Send To: _____

STUDENT SIGNATURE: _____ **DATE:** _____