



State University of New York Health Science Center at Brooklyn  
School of Graduate Studies  
Basic Sciences Building Room 3-114A, Box 41

### Document Request Form

- Official Transcript (\$5 transcript fee, if a check, payable to "SUNY")
- Student copy of transcript                       Enrollment verification                       Letter of good standing
- Graduation Certification (for students who have completed the degree program but who's degree is not yet conferred)

***This form is not to be used to verify degrees. SUNY Downstate has authorized the National Student Clearinghouse to provide enrollment and all degree verifications. Alumni and attendees of SUNY Downstate School of Graduate Studies should instruct interested parties to contact the National Student Clearinghouse:***

National Student Clearinghouse  
2300 Dulles Station Boulevard, Suite 300  
Herndon, VA 20171  
[www.degreeverify.org](http://www.degreeverify.org)

***Return this form, and any payment, to the Graduate School Office – fax: 718-270-3378, 450 Clarkson Avenue, Box 41, Brooklyn, NY 11203 - Do not hand to the Bursar, the Registrar's Office or Student Affairs.***

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Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Graduation Date or last date of attendance: Month \_\_\_\_\_ Year \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date of Request: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Current address: \_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_ Cell #: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

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Mail Document to: \_\_\_\_\_  Pick up document

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FOR GRADUATE OFFICE USE ONLY : Document Processed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Staff initials \_\_\_\_\_