

MELLON FOUNDATION GRADUATE STUDY VERIFICATION FORM

Use this form to request that the Mellon Foundation, through its grant to Duke University, repay a portion of your undergraduate debt.

STUDENT: Complete this section and submit the form to your graduate school Registrar after the academic year has ended.

Student's name: _____

Social Security Number: _____ - _____ - _____

Current Mailing Address: _____

Telephone Number (_____) _____

Program of Graduate Study: _____

Academic year to be verified: _____ / _____ to _____ / _____
Month year month year

Lender Name and Address: _____

GRADUATE SCHOOL REGISTRAR: Please complete this section to verify that the above named student has been enrolled full-time in graduate work at your university for this past academic year.

Student's field of study: _____

Date student began graduate work: _____

Most recent academic year of full-time graduate work completed: _____ / _____ to _____ / _____
Mo. Yr. Mo. Yr.

If Ph.D. degree has been earned, date earned: _____

Registrar's name _____

Signature: _____ Date: _____

Address: _____

Telephone Number: _____

Return completed form to: Deborah Wahl, 011 Allen Building, Box 90047
Duke University, Durham, North Carolina 27708