



201 South 1460 East, Room 105, Salt Lake City, Utah, 84112-9055
Phone: (801) 581-6211; Fax: (801) 585-6350; Email: financialaid@sa.utah.edu
Website: financialaid.utah.edu

STUDENT NAME: _____ **STUDENT ID:** _____

Title of Course/ Course # _____ / _____

Note to the Instructor: Verification of this student's attendance in your class is required to be in accordance with Federal Regulations. Verification may be by means of a class roll, an assignment, a test, or your memory of the student's attendance. Please indicate the latest date they engaged in any academic-related activity in the course by completing the area below:

Please respond with the latest of:

1. Date the student attended your course: _____
2. Date the student turned in coursework for the course: _____
3. Date the student participated in an activity related to the course: _____

Did not Attend

Instructor's Name: _____ Title: _____ Phone #: _____

Instructor's Signature: _____ Date: _____

Title of Course/ Course # _____ / _____

Note to the Instructor: Verification of this student's attendance in your class is required to be in accordance with Federal Regulations. Verification may be by means of a class roll, an assignment, a test, or your memory of the student's attendance. Please indicate the latest date they engaged in any academic-related activity in the course by completing the area below:

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Did not Attend

Instructor's Name: _____ Title: _____ Phone #: _____

Instructor's Signature: _____ Date: _____

If you have more than two classes that require documentation, please print and complete multiple forms.

Deadline for Submission is August 25, 2017