

**EOCSC ENROLLMENT VERIFICATION FORM**

**Section I: to be completed by student**

Re: \_\_\_\_\_  
Student's Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code  
\_\_\_\_\_  
Social Security Number  
\_\_\_\_\_  
Student Identification Number (if applicable)  
\_\_\_\_\_  
\$ \_\_\_\_\_  
Scholarship Amount

**Section II: to be completed by college/university registrar**

Enrollment Verification **must** be sent by the college/university directly  
To: Ellsworth Officers' & Civilian Spouses' Club (EOCSC)  
Attn: Scholarship Committee Chair  
2650 Spaatz Drive  
Bldg. 3163  
Ellsworth AFB, SD 57706

Receipt of this Enrollment Verification form is a prerequisite for the disbursement of the above named student's scholarship award. *Failure to do so will constitute forfeit of scholarship amount.* Signature and seal on this letter certify that this student is enrolled at this college/university for the 2017-2018 school year.

\_\_\_\_\_  
College/University Name

\_\_\_\_\_  
Office Name or Contact Person

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address: Street City State Zip Code  
Signature & Seal of Registrar:  
Signature & official seal required to process scholarship check

