

NSMMS & CRASTE 2025 | Full-Time Student Verification Form Instructions: Please fill out the information below. This must be signed by an individual in your Office of Student Admissions or your Graduate Advisor. Return a scanned copy ASAP.

STUDENT / ATTENDEE INFORMATION  (Student Name)	
(Degree & Major)	
(Name of Student Advisor)	
Will you be enrolled as a student semester/quarter? (check one)	or conducting research during the 2025 summer
YES NO	
ADVISOR / ADMINISTRATOR VAL	LIDATION
	that the individual listed as entered above is a full-time student on the degree and major listed above.
(Full Name, Department – Print)	
(Signature)	(Date)