

## Letter of Good Standing

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The University of Tennessee at Chattanooga  
The Records Office (Dept 5155)  
615 McCallie Avenue  
Chattanooga, TN 37403

### STUDENTS: PLEASE COMPLETE TOP PORTION OF FORM

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

SSN: \_\_\_\_\_ Student's Signature: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_ Purpose of Verification: *Insurance* \_\_\_\_\_ *Transient Letter* \_\_\_\_\_

*Other:* \_\_\_\_\_

Delivery Method: \_\_\_\_\_ Mail (include address below) \_\_\_\_\_ Fax (include number below)  
\_\_\_\_\_ Pick Up by Student

Verification To: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ CITY

\_\_\_\_\_ STATE

\_\_\_\_\_ ZIP CODE

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For Office Use Only:

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### Statement of Standing

◆ \_\_\_\_\_ In Good Standing \_\_\_\_\_ On Academic Probation \_\_\_\_\_ Academically Suspended/Dismissed

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**If we may be of further assistance, please call.**

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**