



Please allow up to **3-5 business days for processing**, upon receipt depending on time of year and volume of requests. **Please submit document requests at least 2 weeks prior to any application or certification deadline so we may better serve you.**

Submit this form to the Assistant Registrar, Carol Jacqueline Archaga, via e-mail CArchaga@med.miami.edu or by dropping off the form to Room 2102 located on the second floor of the Rosensteil Medical Science Building.

STUDENT INFORMATION			
Last Name:	First Name:	Middle Initial:	Student EMPL ID/C#:
Phone Number:		e-Mail:	
Current Graduation Year:		Program:	
REQUESTS			
<input type="checkbox"/> Enrollment Verification Letter <input type="checkbox"/> Letter of Good Standing			
Please specify the name of the individual, institution, organization, or association who will be receiving this document.			
Name: _____			
Address: _____ _____			

<input type="checkbox"/> Jury Duty Postponement Letter - Letter of Postponement describing current registration and time requirements as a medical student. List full courthouse address below. ** Please note, you are responsible for sending the Letter of Postponement and Summons together to the courthouse.			
Juror ID: _____			
Court Name: _____			
Court Address: _____ _____			

<input type="checkbox"/> Loan Deferment Request – Please attach the “In-School Deferment” Form.			
<input type="checkbox"/> Fax to: _____			
<input type="checkbox"/> E-mail to: _____			
<input type="checkbox"/> Mail to: _____ _____			
Student Signature:			Date: