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STUDENT VERIFICATION / CERTIFICATE REQUEST FORM

Student ID: _____ Program Name: _____

Name of Student: _____

Date of Birth: _____ Social Security # _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

I attended the School between the dates of: _____ and _____

In completing this verification request form, I certify that all the information above is correct and updated to the best of my knowledge. I understand and agree that it may take 2 to 3 weeks to verify my information by school and also, I am aware that during this verification process I can be contacted by school to fulfill all the requirements and once I am clear from all departments, it will take another 1 week to process my certificate.

Name Appears on Certificate _____

Student Sign _____ Date _____

