

Request for Letter of Graduate Rank

(1/02)

Name _____

(Please print)

Columbia College ID or SS # _____

Address & Phone # _____

Please send a letter listing my earned degree and major, degree date, any applicable honors, cumulative GPA and my percentile rank when I graduated to the address and/or fax number listed below.

I need a customized letter that contains the following information:

Signature _____ **Date** _____

(Required for processing)

Faxed requests are acceptable; email requests are not acceptable. Columbia College will send the letter via the postal system and/or fax machine per request.

Columbia College
Evaluations Department
1001 Rogers Street
Columbia, MO 65216
(573) 875-7671 or 7681
Fax (573) 875-7391