



Enrollment Verification Form

James Madison University
Office of Financial Aid & Scholarships
MSC 3519
Harrisonburg, VA 22807

The Office of Financial Aid & Scholarships at James Madison University requires verification of enrollment for each consortium participant before disbursing financial aid.

This is to verify that (Student Name) _____,

(Social Security Number) _____ - _____ - _____ will be studying in a study abroad program

administered by (program) _____ at (host) _____.

Your signature on this document verifies that the student listed above is enrolled full-time and has begun attending classes.

Please complete the contact information below and fax to our office at (540) 568-7994.

Thank you,

Shari Arehart
Operations Analyst
James Madison University
Phone: (540) 568-3983
Fax: (540) 568-7994
Email: areharsa@jmu.edu

Signature

Printed Name

Title

Institution

Date