

Document Request Form – Current Students

NOTE: Not to be used for 4th year Away Elective Document Requests

Please submit document requests at least 2 weeks prior to any application or certification deadlines so we may better serve you. The completed form(s) can be returned via email to SOM-Registrar@medsch.ucr.edu, or in person to the School of Medicine Registrar.

Student Information - Please Print Clearly:

Full Name: _____ Class of: _____ SID #: _____

Signature: _____ Date: _____

Authorization signature required: I authorize release of information as directed on this Document Request Form

Request(s):

Enrollment Verification Letter

Letter of Good Standing

Jury Duty - Letter of exemption 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 Exemption and Summons together to the courthouse**

Juror ID # _____ Reporting Location #: _____ Group #: _____

Other (please specify): _____

Special Instructions (please specify): _____

Loan Deferment Request – Direct all requests to the School of Medicine Financial Aid Office (Finaid@medsch.ucr.edu)

Sending Instructions: Please clearly print name and complete address to which document(s) should be addressed to. Complete a separate Document Request Form when sending document(s) to multiple addressees.

PICK UP – you will receive an e-mail when the document(s) is available to pick up.

EMAIL TO: _____

Complete recipient address to which you would like document(s) sent.

MAIL TO:

