

**Mail completed form to:** Pepperdine University / OneStop / 24255 Pacific Coast Highway / Malibu, CA 90263  
**or fax to:** 310-506-7203, attn: OneStop  
**or scan and email to:** [OneStop@pepperdine.edu](mailto:OneStop@pepperdine.edu)

**Student Information:**

Last Name		First Name		MI	Previous Last Name
Current Address					ID Number (CWID) or SSN
City		State	Zip Code		Birth date
E-mail address					Phone Number
School(s) Attended					Years Attended
<input type="checkbox"/> Seaver College <input type="checkbox"/> GSEP <input type="checkbox"/> GSBM <input type="checkbox"/> Public Policy <input type="checkbox"/> School of Law <input type="checkbox"/> Professional Studies <input type="checkbox"/> L.A.					From:                      To:

**Information to Verify:**

**Please check all that apply:**

- Complete the attached form. Release any information requested.
- Provide the information indicated below:
  - Terms of Attendance
  - Current Enrollment Information for \_\_\_\_\_ term  
(includes full-time, ¾-time, ½-time status...)
  - Units Completed to Date
  - Cumulative GPA
  - Term GPA for \_\_\_\_\_ term
  - Degree Received
  - Other (please specify): \_\_\_\_\_

**Delivery Method:**

Pick up at OneStop

or  Fax to: \_\_\_\_\_ Attn: \_\_\_\_\_

or  Mail to: \_\_\_\_\_

or  Email to: \_\_\_\_\_

**Authorization:**

I hereby give my consent for Pepperdine University to release the information requested above.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>FOR OFFICE USE</b>	Financial Approval	Processed By	Sent/Received By	Date