

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

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 _____

FOR OFFICE USE	Financial Approval	Processed By	Sent/Received By	Date