



## Verification of Student Status and Grades

### TO BE COMPLETED BY EMPLOYEE:

Name: \_\_\_\_\_ HID: \_\_\_\_\_

Student I.D. Number: \_\_\_\_\_

College/University: \_\_\_\_\_

I authorize \_\_\_\_\_ to release the following information regarding my college major, total credits earned, student level, and copy of my transcripts and/or recent grades to my employer:

Mission Support Alliance, LLC (MSA)  
Human Resource Department—Co-Op Program Administrator  
2430 Stevens Center Place (H2-16)  
Richland, WA 99354

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

### TO BE COMPLETED BY COLLEGE/UNIVERSITY OFFICIAL:

Students Current Major: \_\_\_\_\_ Full Time Yes No

Total Credits Earned: \_\_\_\_\_ Current Overall GPA \_\_\_\_\_

Student's Level:  Freshman  Sophomore  Junior  Senior As of date: \_\_\_\_\_

Name (printed): \_\_\_\_\_ Signature: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Current Date: \_\_\_\_\_

**Please Attach Copy of:  
Official Transcript (first time only)  
Most Recent Grades (required at the end of each term)**

*(Please initial each page)*