



Office of the Registrar
MS 3D1 Attn: Registration Services
4400 University Drive
Fairfax, Virginia 22030
Phone: 703-993-2441; Fax: 703-993-4668
Email: registrar@gmu.edu

Solomon Amendment Request Form

Requestor Information:

Name _____
First Last

Organization _____

Address _____

Phone Number _____ - _____ - _____ Request Date _____

Data Requested:

Semester Data Requested _____ (current or previous only)

Age Range _____ (identify age range, must be 17 or older)

All students _____ (undergraduate, graduate, law)

OR

All Undergraduate students _____ OR Freshmen _____ Sophomores _____ Juniors _____ Seniors _____

Specific Major _____

AND/OR

Graduate students only _____ Specific Major _____

AND/OR

Law students only _____

Information to be emailed as an encrypted, password-protected EXCEL file:

Email address: _____

Check which of the following data elements should be included in the EXCEL file:

- Name
Address
Telephone number
Date of Birth or Age range
Major
Class Level (Freshman, Sophomore, etc)
Degrees awarded

Requestor's Signature: _____ Date: _____