



FOREIGN COLLEGE VERIFICATION OF CONTINUED REGISTRATION AND ATTENDANCE

April & May 2020

***Form to be completed by College Official Only**

Student Name:

SUSI Reference Number:

Date of Birth:

Name of University / College / Institution:

Course Description:

Course Code:

Course Year:

This student is registered to the Course and Year for April & May 2020 : YES / NO

This student has satisfactory attendance for April & May 2020: YES / NO

Any other comments with regard to Student Registration or Attendance:

Signed by (College Official Only): _____

Print Name: _____ Date: _____

Print Contact Email: _____ Contact Phone Number: _____

Official College Stamp:

****I confirm that the information given in this form is true, complete and accurate.**



Please return completed forms to support@susi.ie . Should you have any queries or require further information on completion of this form please don't hesitate to contact us at support@susi.ie.