

## Student Voter Enrollment and Local Address Verification Request

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Ranger Mail: \_\_\_\_\_ @rangers.uwp.edu Student ID Number: \_\_\_\_\_

**Enrollment Verifications will be available 5 business days after receipt of request**

Enrolled Credits for Term and Year: \_\_\_\_\_  
(Waitlisted courses are not enrollment and are not calculated in enrolled hours.)

Check box for your on-campus address:

**University Apartments** / 4019 University Dr / Kenosha WI 53144

**Ranger Hall** / 4135 University Dr / Kenosha WI 53144

**Pike River Suites** / 3737 University Dr / Kenosha WI 53144

(Your campus address will be included in the verification and updated in SOLAR)

### Delivery Method:

Pick Up  
(Please return in 5 business days with a photo ID)

Mail To: \_\_\_\_\_  
Name

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

Attention

Fax to: \_\_\_\_\_

Street Address

ATTN: \_\_\_\_\_

City, State Zip

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

By signing, I am authorizing the requested information to be released.