

MIDDLE TENNESSEE STATE UNIVERSITY

VERIFICATION OF AGE FOR MINORS

To Be Completed By Minor:

Name (please print): _____
Last First Middle

Social Security Number: _____ -- _____ -- _____

To Be Completed By School:

Our school records show the date of birth of _____
Student's Name

to be _____ / _____ / _____.

Signature and Title

Name of School

School Address

Date

Please return completed form to: Assistant Vice President for Human Resource Services
Middle Tennessee State University
Sam H. Ingram Building, Rm. 204
2269 Middle Tennessee Blvd.
Murfreesboro, TN 37132