Education Verification Request Form
Presbyterian Historical Society, 425 Lombard Street, Philadelphia, PA 19147
Phone: 215-627-1852 • Fax: 215-928-3870 • www.history.pcusa.org

Please fully complete this form and mail or fax to the Presbyterian Historical Society.

Name of School: ____________________________________________________________

Name of Student: __________________________________________________________

Maiden Name or other name used while at school: ____________________________

$25.00 Per Education Verification Request
Payment (please select one):

☐ My check/money order payable to the Presbyterian Historical Society is enclosed.

☐ My credit card information is: ☐ Visa ☐ Mastercard ☐ Discover

Name on Card: ____________________________________________________________

Credit Card Number: ______________________________________________________

Expiration Date: ___________ 3 Digit Security Code (on back): ______________

Address Where Education Verification Should Be Sent:

Institution/Company/Individual Name: ______________________________________

Department/Office: ________________________________________________________

Street/PO Box: ____________________________________________________________

City, State, Zip Code: ______________________________________________________

Fax: ____________________________________________________________________

Form revised November 2018