

**SCHOOL OF KINESIOLOGY
UNIVERSITY OF BRITISH COLUMBIA**

REQUEST FOR LETTER

Personal Information

Your Name: _____

Student Number: _____ Year: _____

Program: _____ Phone Number: _____

Email Address: _____

Type of Letter Needed

- Please check this box if you require a letter to confirm your status as a full-time student in the School of Kinesiology. Please use the space below for any additional information.

- Please check this box if you require a letter or memo for reasons confirming status. Please provide details in the space below.

**If you require confirmation of graduation, please use the
"Request for Letter Graduation" form.**

Details

Important information to include would be to whom the letter should be addressed ("To Whom It May Concern" if unknown), the complete mailing address, and any other details you wish the letter to include (in point form).

If you need more space, please continue on the back of this page

Picking up Finished Letter

Requested letters usually will take a minimum of **3** days to complete. Students are expected to pick up their own letters. If you cannot pick up your letter, please indicate so in the "Details" section above and include your mailing address.