

LETTER REQUEST TO CONFIRM UNIVERSITY STATUS

Last name: _____

First name: _____

Student number: _____

Email: _____

Date submitted: _____

Signature: _____

Letter Type – Select One

A **confirmation of current registration letter** includes verification of your registration for the current or most recent academic session, your degree type, year of study, and the standard length of degree completion. Specify applicable session(s) and year for which you require confirmation:

- Summer 20____
 Fall 20____
 Winter 20____

A **confirmation of future enrolment letter** is for students who require verification that they are eligible to enrol, or have enrolled in courses for the next academic session. This letter includes your degree type, your year of study, and the standard length of degree completion. Specify applicable session(s) and year for which you require confirmation:

- Summer 20____
 Fall 20____
 Winter 20____

A **confirmation of past registration letter** includes verification of your registration for a session you have already completed. Details include your degree type, year of study, and standard length of degree completion. Please specify the year(s) and session(s) for which you require confirmation.

- Summer 20____
 Fall 20____
 Winter 20____

A letter to **apply for/extend Canadian study permit or visa** includes verification of your registration for the current or most recent academic session. Specify applicable session(s) and year for which you require confirmation:

- Summer 20____
 Fall 20____
 Winter 20____

Other (please note that this request requires approval):

Method of Delivery - Select One

- Email an electronic copy to my U of T email address as listed on ACORN/ROSI
 Pick up at a later date (Please contact us to confirm if your letter is ready. Letters held for more than 3 months will be destroyed with no refund)
 Send to my mailing address on ACORN/ROSI (NOTE: it is your responsibility to update your mailing address online BEFORE you select this option so that it is mailed to the correct address. If the address is incorrect, a new letter will only be produced & mailed for an additional \$8 fee)

Payment: \$8 non-refundable fee. Cash, Interac, MasterCard, and Amex Accepted.

If faxing, mailing, or emailing this form, you must include:

Credit card number: _____ Expiry date: _____ CVC#: _____

Cardholder Name: _____ Cardholder Signature: _____