Request for a Letter(s)  
Confirming Registration

Please allow five business days for letter(s) to be processed.

Section 1: To be completed by the student:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Student Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree:</td>
<td>Graduate Unit (Department, Institute, Centre, Faculty):</td>
</tr>
<tr>
<td>Contact Info.(Phone/Email):</td>
<td>Number of Copies Requested:</td>
</tr>
<tr>
<td>Pick Letter Up at 63 St. George Street:</td>
<td>Yes  No *</td>
</tr>
</tbody>
</table>

* If no, student address letter is to be mailed (if applicable):

<table>
<thead>
<tr>
<th>Indicate which session(s) you are currently registered in and need to have confirmed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Fall (Sept. to Dec.) ☐ Winter (Jan. to Apr.) ☐ Summer (May to Aug.)</td>
</tr>
</tbody>
</table>

We will confirm your registration and the above information. Also, indicate below if you want the following information recorded in your letter:

- ☐ Supervisor:
- ☐ Program Start Date:
- ☐ Expected Date of Completion, indicate month/year:
- ☐ Fees Have Been Paid, indicate amount: $
- ☐ Time Limit for Completion of the Program, indicate year:
- ☐ For this academic year, I certify that I am supported by scholarship, fellowships, research, or teaching money, indicate estimated amount: $
- ☐ Other (specify):

I hereby authorize the University of Toronto to release the above information. **

** Student’s Signature: __________________________ Date: ___________

Section 2: To be Completed by the School of Graduate Studies

Date Processed: __________________________ Date Mailed: __________________________

Freedom of Information and Protection of Privacy Act: www.rosi.utoronto.ca/fippa.php

02/2017