

## REQUEST FOR LETTER

NAME: \_\_\_\_\_ YEAR: I II III IV (Circle One)

FEMALE: \_\_\_\_\_ MALE: \_\_\_\_\_

STUDENT PICK-UP: \_\_\_\_\_ MAIL OUT: \_\_\_\_\_ (Check One)

TELEPHONE: \_\_\_\_\_

### Type of Letter:

\_\_\_\_\_ Good Standing Letter

\_\_\_\_\_ Update Deans Letter (Graduated in 19\_\_/20\_\_)

\_\_\_\_\_ Deans Letter

\_\_\_\_\_ Letter of Recommendation  
(Attach CV or list med-school activities on the back)

\_\_\_\_\_ Acdutra (Military)

\_\_\_\_\_ Jury Letter (Attach notification from court)

\_\_\_\_\_ Other (Specify) \_\_\_\_\_

### ADDRESS OF PLACE WHERE THE LETTER IS TO BE SENT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Transcripts must be requested through the Records and Registration Office.