



UNIVERSITY COLLEGE

UC ACADEMIC ADVISING & REGISTRAR'S OFFICE REQUEST FOR A LETTER

To Be Completed by Student:

Last Name: _____ First Name: _____

UofT Student/Applicant Number: _____

Current Telephone Number: _____

Email _____ @ mail.utoronto.ca

Date of Birth: _____
YEAR / MONTH / DAY**Information Requested:**

- Confirm current registration status (full-time/part-time, degree and year of study)
- Confirm past registration status – specify session(s) and year(s): _____
- Confirm expected graduation date – specify (June/November): _____
- Other – specify: _____

Purpose of Letter:

- Study Permit/Visa (letters will include the University of Toronto's Designated Learning Institution (DLI) number)
- RESP/insurance/financial
- Other: _____

The University of Toronto respects your privacy. Personal information that you provide to the University is collected pursuant to section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of administering admissions, registration, academic programs, university-related student activities, activities of student societies, financial assistance and awards, graduation and university advancement, and for the purpose of statistical reporting to government agencies. At all times it will be protected in accordance with the *Freedom of Information and Protection of Privacy Act*. If you have questions, please refer to www.utoronto.ca/privacy or contact the University Freedom of Information and Protection of Privacy Coordinator at 416-946-7303, McMurrich Building, Room 201, 12 Queen's Park Crescent West, Toronto, ON, M5S 1A8.

Signature _____ Date _____

Delivery Method (choose one):

- Pick up at Registrar's Office Scanned to UTMail+ account Sent to mailing address on ACORN
- Pickup at Registrar's Office by third party – full name: _____
(Note: all third parties must present photo ID which matches the above name)

Letters will be ready within (2) to (3) business days, but may take slightly longer during peak periods.

To Be Completed by UC staff

Processed By: _____ Date: _____ Initials: _____