MERIT UNIVERSITY

MERIT

3699 Wilshire Blvd. Ste. 970 Los Angeles, CA 90010

STUDENT LETTER REQUEST FORM

INSTRUCTIONS:

LETTER REQUEST: Please select the type of letter you would like to request. Complete the required information below for the letter you are requesting. Pick up your letter 5 full business days after you submit the request with payment. □ Enrollment Verification □ Invitation/Supporting Letter (to US Consulate/US Embassy) □ Social Security Letter (to Social Security Administration Office) □ Other Letters			
		Please provide information on the type of letter you no	
		information for accuracy of the letter. (To Whom, Purp	pose, & Duration, etc.)
		I CTUDENT INFORMATION	
		I. STUDENT INFORMATION	P' (N
		Last Name:	First Name:
		Program/Major:	Student ID:
Program/ Major:	Student iv:		
Program Start Date:	Expected Graduation:		
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Phone Number:	Email Address:		
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Mailing Address:			
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II. TO WHOM:			
III. PURPOSE / OTHER PERTINENT INFORMATION:			
IV. UNDERSTANDING AND AUTHORIZATION:			
I understand the following: 1. That the letter I am requesting may contain personal information including my legal status.			
	n additional 5 business days to receive an updated letter.		
3. That my letter request will be denied if I do not prov			
4. That I must send a written request to MU for anyone			
Student Student	, other than mysen to piek up my retter.		
Signature/date			
organical of water			
*Should you have any questions about completing this form, please contact the University. (Phone: 213-325-2760, email:			
registrar@merituniv.com)			
U DECORD			
V. RECORD			
FEE (\$10) [] Credit Card [] Cas	sh [] Check		
	Sh [] Check Date:		