

Letter of Verification of Enrollment Request Form

Today's Date: ____/____/____
Time Received by OSS: _____

Name of Student: _____

Email: _____

Circle program: CP LA

Circle the term and year you began your studies at HTIC:

Winter Spring Summer Fall

Year: _____

Language of Letter:

____ English copies @ \$ 1.00/copy = ____ (pick-up after 10am next day)

____ English copies @ \$ 5.00/copy = ____ (RUSH same day pick-up)

____ Japanese copies @ \$5.00/copy = ____ (pick-up after 10am next day)

____ Japanese copies @ \$10.00/copy = ____ (RUSH same day pick-up)

** Your name in KANJI _____

**** RUSH request MUST be turned in by 2pm to guarantee same day pick-up****

Student Signature: _____ Date: ____/____/____

Issued By: _____ Date: ____/____/____

****STUDENT IS RESPONSIBLE FOR MAILING THIS DOCUMENT. HTIC WILL NOT BE RESPONSIBLE FOR ANY TYPE OF MAILING****

****Please take this form and PAY Fiscal department on the 1st floor (A119) BEFORE submitting it to OSS for processing*.***

For Official Use ONLY:

HTIC # _____

Updated: April 20, 2015