



ECE LETTER REQUEST FORM

To be submitted for approval to the ECE Reception (EOW 448 or ecesecc@uvic.ca) with ALL sections below complete.
 IF APPROVED PLEASE ALLOW UP TO TWO WEEKS FOR LETTER PROCESSING.

STUDENT INFORMATION	
Student Name	Student Number V0
Program	Email
Student Signature	Date

REASON FOR LETTER REQUEST	
Teaching Assistant Appointment (maximum 1 year history provided)	<input type="checkbox"/> Current term <input type="checkbox"/> Previous term(s)
Graduate Student Support Payment	<input type="checkbox"/> Time period _____ to _____ (Month, Year)
Please provide rationale for the request:	

LETTER FORMAT REQUIRED	
<input type="checkbox"/> PDF (email copy)	<input type="checkbox"/> Original document (paper copy)

INFORMATION OF THE PERSON/ORGANIZATION WHICH THE LETTER IS TO BE ADDRESSED	
Addressee Name	Address

DEPARTMENT APPROVAL		
Name	Signature	Date