

# STUDENT LETTERS Request Form

## University Center for International Education

(UCIE STAMP)

<b>FIRST NAME:</b>	
<b>LAST NAME:</b>	
<b>UID#:</b>	
<b>PHONE NUMBER:</b>	
<b>WSU EMAIL:</b>	

*Please allow up to five (5) business days for processing.*

### Type of Letter requesting: (check box)

<input type="checkbox"/> <b>General Student Certification Letter</b> -confirming active status as a WSU student  <input type="checkbox"/> <b>Tuition Student Certification Letter</b> -confirming active status and annual tuition costs  <input type="checkbox"/> <b>Transient Student Certification Letter</b> to attend (name of school): _____  For (TERM): _____ <i>[Transient Students MUST fill out RCL form IF you will be taking less than full time classes at Wright State]</i>	<input type="checkbox"/> <b>Bank Letter</b> - if requested to open an account  <input type="checkbox"/> <b>Driver's License Letter</b>  <input type="checkbox"/> <b>Social Security Letter</b> – LEAP STUDENTS ONLY-confirming NOT eligible for SSN application  <input type="checkbox"/> <b>Family Visit Invitation Letter</b>  <input type="checkbox"/> <b>Graduation Invitation Letter</b> MUST attach receipt for commencement
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<b>Date of Birth:</b> (M/D/Y)	<b>Gender:</b> (check) <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>VISA TYPE:</b> (check) <input type="checkbox"/> F-1 <input type="checkbox"/> J-1 student <input type="checkbox"/> J-1 scholar <input type="checkbox"/> other: _____	<b>Current Level of Study:</b> (check) <input type="checkbox"/> LEAP (ESL) <input type="checkbox"/> UNDERGRAD <input type="checkbox"/> MASTERS <input type="checkbox"/> PhD
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<b>Major/Program of Study:</b>	<b>Expected term you will complete studies/program:</b>
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**Start and End Date listed on WSU SEVIS I-20:** (line 5)

<b>Are you on OPT?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>OPT employment authorization dates:</b> (start date - end date)
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<b>Number of credit hours registered for current term:</b>	<b>If you are pre-registered for next term, indicate number of credit hours registered for future term:</b>
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<b>ADDITIONAL INFORMATION/SPECIAL REQUESTS:</b> _____ _____	<input type="checkbox"/> <b>Notary Stamp</b> (will add two days to processing time)
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_