REQUEST FOR A Dean’s LETTER

Today’s Date: ___________________________

Student’s Name: ______________________________________________________________________

Penn ID (8 digits): ____________________________ Email: ______________________________

Date Required for Letter Pick-Up
(Minimum of two business days is needed to complete request): ___________________________

I am requesting a “Dean’s” letter for the following purpose (check all that apply):

☑ Verify my Full-time Status
☑ Verify that I am in Good Academic Standing
☑ Verify my Expected Date of Graduation
☑ Verify my Dates of Enrollment
☑ Verify my Degree Awarded
☑ Confirm that Penn does not rank students
☑ Other: ____________________________

Additional information to be included in Letter (if any): ______________________________________

____________________________________________________________________________________

☐ Letter requires an Official SEAS seal

When completed, please:

☐ Mail letter to this address: ____________________________________________________________

____________________________________________________________________________________

☐ Fax letter to this number: ____________________________________________________________

☐ I will pick up the letter from 111 Towne.

* PLEASE NOTE THAT A MINIMUM OF TWO BUSINESS DAYS IS NEEDED TO COMPLETE YOUR REQUEST.

Student Signature: ____________________________ Date: ____________________________

RETURN FORM TO: OFFICE OF ACADEMIC PROGRAMS, 111 TOWNE

April, 2013