



## Letter Request

8432 Magnolia Ave., Riverside, CA 92504 (T) 951.343.4566 (E) registrar@calbaptist.edu

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Full Name: \_\_\_\_\_ ID# (if unknown, use SSN): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Program: ☐ Undergraduate ☐ Graduate ☐ Doctorate

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### Letter should include the following information:

☐ Additional form attached

☐ Statement of Completion\*

☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\* Only issued if a student has an approved graduation application and all degree requirements are complete.*

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### Distribution Method (please select at least one):

☐ \*\*\* **Pick up option unavailable at this time** \*\*\*

☐ Mailed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

☐ Emailed Email address: \_\_\_\_\_

☐ Faxed Fax No. \_\_\_\_\_

*I understand that letter request processing is typically 3-5 working days after form has been received. I may be contacted to provide additional information/documentation if needed. Letter requests will not be processed without the signature of the student.*

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### Office Use Only:

Date Form Received: \_\_\_\_\_

Date Completed: \_\_\_\_\_ Initials: \_\_\_\_\_

Comments: \_\_\_\_\_

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