



Name: _____ Student Number: _____

E-mail Address: _____

PLEASE SELECT FROM THE FOLLOWING OPTIONS:

1. Confirmation of Enrollment Letter (Letter of Good Standing)

- Bank (No. of copies) _____
- Other - General Use (No. of copies) _____

2. Observership Letter (Letter of Good Standing)

- Academic Session Observership Letter: (1st & 2nd Yr)
- Summer Observership Letter: (1st & 2nd Yr):
 - Within Canada (No. of copies) _____
 - Outside Canada (No. of copies) _____
- NOSM Summer Observership Letter: (1st & 2nd Yr)
- ROMP (Rural Ontario Medical Program) Letter:
 - ROMP Week
 - Summer Placement
 - Clerkship Elective
 - Core Rotation

(All ROMP letters will be sent directly to ROMP by the Office of the Registrar)

3. Other Requests

- Endorsement of Form (Please attach)
- Jury Duty Letter
- Miscellaneous: *(briefly describe)*

Method of Delivery: Pick-up Mail Fax Email

(please provide details)

SIGNATURE: _____ DATE: _____