

REQUEST FOR LETTER



UTM

Academic Session: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Student #: \_\_\_\_\_

Phone# (Home): \_\_\_\_\_ Work/Cell/Pgr/: \_\_\_\_\_

I, \_\_\_\_\_ give Liz Martin my permission write a letter to  
*(Student's Name)*

\_\_\_\_\_  
*(Name, organization, address, phone number)*

\_\_\_\_\_

informing them that I : *( please check which items apply)*

- am/was registered with the AccessAbility Resource Centre
- the nature of my disability (please write what you would like me to put in the letter e.g. learning disability, multiple sclerosis, diabetes, etc).

\_\_\_\_\_

- the length of time I am/was registered
- the accommodations I am/was receiving while registered.
- I require a letter which states:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**All letters are to be picked up and reviewed by the student who requested it. If other arrangements are necessary, please call the ARC at (905) 828-3847.**

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Date