Click here to enter a date.

To: HCBE Graduate Admissions

This document is to confirm that the student listed is anticipated to meet the degree conferral requirements for his/her program. The student is currently enrolled in their last semester/term of courses and is in good academic standing.

Student Name: Click here to enter text.

Date of Birth: Click here to enter a date.

Name of Institution: Click here to enter text.

Program of Study: Click here to enter text.

Anticipated degree

conferral/graduation date: Click here to enter a date.

Sincerely,

Click here to enter text.

Click here to enter text.

Click here to enter text.

Click here to enter text.