

To Whom It May Concern Letter requests

Dear Student,

Please complete this form in order to get the –To Whom It May Concern- letter showing your **midterms and quizzes dates**. On submitting the filled form to the registration department you shall receive the letter within 2 working days.

Please make sure that the information stated below are accurate based on professor's record for future reference.

ID#:	Student Name:			
Major:				
Academic Year :	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer	<input type="checkbox"/> Winter
Letter Language:	<input type="checkbox"/> Arabic	<input type="checkbox"/> English		
Mobile #:				

Course Title/ Course Code #	Type of Exam (Quiz – Midterm)	Date of Exam	Instructor Name	The student	Instructor's Signature
	<input type="checkbox"/> Quiz <input type="checkbox"/> Midterm	_ / _ / _		<input type="checkbox"/> Must attend <input type="checkbox"/> Has attended	
	<input type="checkbox"/> Quiz <input type="checkbox"/> Midterm	_ / _ / _		<input type="checkbox"/> Must attend <input type="checkbox"/> Has attended	
	<input type="checkbox"/> Quiz <input type="checkbox"/> Midterm	_ / _ / _		<input type="checkbox"/> Must attend <input type="checkbox"/> Has attended	
	<input type="checkbox"/> Quiz <input type="checkbox"/> Midterm	_ / _ / _		<input type="checkbox"/> Must attend <input type="checkbox"/> Has attended	
	<input type="checkbox"/> Quiz <input type="checkbox"/> Midterm	_ / _ / _		<input type="checkbox"/> Must attend <input type="checkbox"/> Has attended	

Comments

Student's Signature: _____

Date: ___ / ___ / ___