

STATUS LETTER FOR INTERNATIONAL STUDENTS REQUEST FORM

FEE PAYMENT RECEIPT IMPRINT
Account No. 1-11-10625 (HK 51)

A) PERSONAL INFORMATION

Student ID No.:		Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/>
First Name:		
Last Name:		
Street Address:		Apt #:
City:	Province:	Postal Code:
Program:		
Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Continuing Ed. <input type="checkbox"/>		Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>
Current Year of Enrollment: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Alumni <input type="checkbox"/>		Date of Graduation: June <input type="checkbox"/> October <input type="checkbox"/> Year: _____
Toronto Phone Number:	E-mail:	

RETURN FORM TO INTERNATIONAL
STUDENT SERVICES (POD-50A)

B) PLEASE SPECIFY THE TYPE OF STATUS LETTER REQUIRED

- | | |
|---|---|
| <input type="checkbox"/> Application for an Immigration Document <ul style="list-style-type: none"> <input type="checkbox"/> Study Permit: Expiry Date: _____ (D/M/Y) <input type="checkbox"/> Co-op/Internship Work Permit <input type="checkbox"/> Post-Graduation Work Permit <input type="checkbox"/> Temporary Resident Visa (TRV) – stuck to passport <input type="checkbox"/> Spousal Work Permit – full-time students <u>ONLY</u> <input type="checkbox"/> Permanent Residence – confirm enrollment <input type="checkbox"/> Visitor Visa to the United States <input type="checkbox"/> Invitation for Family Members <ul style="list-style-type: none"> <input type="checkbox"/> Attend Graduation <input type="checkbox"/> Visit Canada <input type="checkbox"/> Explanation/Confirmation of an Immigration Policy <ul style="list-style-type: none"> <input type="checkbox"/> "Implied Status" during application processing <input type="checkbox"/> Post-Graduation Work Permit | <input type="checkbox"/> HRSDC Confirmation Exemption – student work permits
<input type="checkbox"/> Educational Institution listed on Co-op Work Permit
<input type="checkbox"/> On-campus Employment Eligibility

<input type="checkbox"/> Statement of Estimated Expenses – studying in Canada
<input type="checkbox"/> University Health Insurance Plan (UHIP) <ul style="list-style-type: none"> <input type="checkbox"/> Mandatory Coverage Policy and Coverage Period <input type="checkbox"/> Coverage outside of Canada <input type="checkbox"/> Confirmation of status on a Third Party Form
<input type="checkbox"/> General Status at Ryerson
<input type="checkbox"/> Guarantor Letter and signature (must have been at Ryerson for 2 years or more)
<input type="checkbox"/> Other (Please specify – use the back of this form if necessary) |
|---|---|

FIVE (5) BUSINESS DAYS REQUIRED FOR PROCESSING. This does not include any time required for payment processing or mail delivery. It is your responsibility to specify what type of letter you need, and to provide all necessary information. Refunds will not be issued to students who fail to provide adequate information, and you will be charged for any additional status letter requests.

C) PAYMENT AND SUBMISSION METHODS

<p>The fee for each letter is \$20. Copies are \$5 each.</p> <p>Please prepare _____ letters at \$20 = \$ _____</p> <p>And include _____ copies at \$5 = \$ _____</p> <p>Add Rush Service* at \$15 = \$ _____</p> <p>TOTAL FEE PAYMENT = \$ _____</p> <p><small>*Within 48 hours of being received by ISS</small></p> <p><input type="checkbox"/> MAIL TO ADDRESS ABOVE – only applies to addresses outside of the Greater Toronto Area</p> <p>Received by ISS: _____ (D/M/Y)</p>	<p>By mail: Enclose with form credit card information or a money order payable to Ryerson University. Mail to: Student Fees, Ryerson University, 350 Victoria Street, Toronto, ON, Canada M5B 2K3</p> <p>By Fax: Complete the credit card section below, and fax this form to 416-542-5873 (ISS).</p> <p>In person: (1) Bring this form to Student Fees (POD-64) to make the payment. (2) Submit the form to International Services for Students (POD-50A).</p>
<p>STUDENT SIGNATURE _____</p>	<p>DATE _____</p>
	<p>International Student Services (ISS) 350 Victoria Street, Toronto, Ontario, Canada M5B 2K3 Tel: 416-979-5000 ext. 6655, Fax: 416-542-5873 issask@ryerson.ca, www.ryerson.ca/internationalservices</p>

This information is collected under the authority of the Ryerson University Act and may be used for the purposes of verifying registration, academic, and immigration status. By signing this form, you are providing your consent for ISS to share your information with a third party. If you have questions about the collection, use, and disclosure of this information by the University please contact the Co-ordinator of International Student Services at 416-979-5000 extension 6663.

<p>VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX <input type="checkbox"/></p> <p>Card Number: _____</p> <p>Name on Card: _____</p> <p>Expiry Date: Month _____ Year _____</p>	<p>I authorize Ryerson University to charge \$ _____ for the payment of my Status Letter to my VISA / MASTERCARD / American Express (AMEX) account. I acknowledge that my Status Letter will not be processed in the event of a declined credit card transaction.</p>
<p>_____</p> <p>CARDHOLDER SIGNATURE</p>	<p>_____</p> <p>STUDENT NUMBER</p>