



Employer Reimbursement- Grade Letter Request ADEP Students

60 West Olsen Road #1325, Thousand Oaks, CA 91360
Phone: (805) 493-3105 Fax: (805) 493-3106 www.callutheran.edu.registrar

Processing time: 3-5 business days

Student's Name:

_____ Last First Middle I.

Address:

_____ Number and Street City State Zip

e-mail:

Phone #: _____

Check appropriate term:

- Fall Winter
 Spring Summer

Degree / Major:

Information to be included in the letter (check all that apply):

- Date coursework completed
 Grades
 GPA
 Other: _____

Pick up letter at Registrar's office. (**You will be notified via phone when ready.**)

Fax letter to: Name _____ Fax #: _____

Send letter to:

_____ Name

_____ Address

_____ City State Zip

ID#: _____

Student Signature: _____

Date: _____

CLU Registrar's Office Use Only:

Date processed: _____

Initials: _____