



LETTER OF COMPLETION REQUEST
Brigham Young University

Date: _____

Name: _____ Student ID Number: _____

Major: _____ Degree: _____

Second Major: _____

Minor: _____

Completion Date: _____ Graduation Date: _____

Teaching Certification Necessary for Graduation? Yes No

The above student has completed all his/her requirements for a Bachelor degree. Please write him/her a letter of completion.

Upon completion of the following courses, this student will have completed all requirements for a Bachelor degree. Please write a conditional letter of completion for him/her.

Major:

Minor:

GE:

Supervisor/Advisor Signature

Date

STUDENT RELEASE

Student will pick up the letter in person.

Please send letter to:

I give my permission to release this information to the person and/or addressee listed above.

Student Signature

Date