



**UNIVERSITY of the SOUTHERN CARIBBEAN
SCHOOL OF BUSINESS
LETTER REQUEST FORM**

Student's Name: _____ Student ID: _____

Phone number: _____ Email: _____

Male: Major: _____ Date: _____

Female:

Name of Individual to whom the letter should be addressed: **(e.g Jane Doe)** _____

Job Title of letter recipient: **(e.g. Human Resource Manager)** _____

Name of Organisation: **(e.g University of the Southern Caribbean)** _____

Address of Organisation: **(e.g. Royal Road, Maracas, St. Joseph)** _____

Please indicate from the sections below what type of Letter you are requesting:

➤ **LETTER FOR INTERNSHIP**

Please select the section you are registered for:

- ACCT 499 ECON 499 HRMN 499 HSTM 499
 FNCE 499 MGMT 499 MKTG 499

➤ **LETTER OF RECOMMENDATION**

Lecturer requesting from: _____

➤ **LETTER TO EMPLOYER**

Reason for letter request: _____

If you are requesting the letter for purpose of examinations, please fill out the table below:

EXAMINATION SCHEDULE			
COURSE CODE	COURSE NAME	EXAM DATE	EXAM TIME