

## **ESL Document Request Form**

609 Erin Street Winnipeg, MB R3G 2W1 204.989.6434

This form is to be used by current or former students who have studied at MITT's English Language Centre

Email completed forms to: esl@mitt.ca Minimum processing time is five (5) business days

Telephone requests will not be accepted

SECTION A: Student Ir	nformation		
Student Name:			
_	Last Name (Family Name)	First Name (Given	Name)
Phone Number: _		_Email:	
SECTION B: Documer	nt Requested		
~	al documents will not be pro ee is charged for each copy		to students will be duplicate
Check off the doc	cuments requested and the r	number of copies for each ite	em:
☐ ESL Confirm	nation of Enrolment Letter (\$	\$18.00)	Number of
☐ Canadian L Copies	anguage Benchmark (CLB) S	Student Progress Report (\$18	8.00)Number of
☐ LINC Certif	icate (\$18.00)		Number of Copies
☐ Please email		m 609 Erin Street (Erin Camp	•
Address:			
City:	Province:	Postal Code: _	
SECTION D: Payment	Method		
I authorize the followi	ng amount to be charged to	the credit card noted below	TOTAL:
□ Visa	☐ MasterCa		American Express
Name on Card:		CardholderSignatu	ıre:
Card Number:			
Expiry Date: (MM/YY):	Security C	Code: (3-digits on back)	

For Office Use Only:		
Student Number:		-
Date Request Received:		=
Request Received By:	Staff Name (First and Last)	-
Date Request Completed:		-
Request Completed By:		_
	Staff Name (First and Last)	