

TEXAS SOUTHERN UNIVERSITY
3100 CLEBURNE AVENUE – HOUSTON, TEXAS 77004

REQUEST FOR LETTER OF COMPLETION

Date Submitted: _____

Student's Name _____

Major and Degree _____

Student's T# _____

Graduation Date _____

PLEASE NOTE THAT OUR OFFICE WILL BEGIN PROCESSING LETTERS OF COMPLETION BY THE DATES LISTED BELOW FOR EACH GRADUATION PERIOD.

- December Graduation Second Week of January
- May Graduation Second Week of June
- August Graduation Fourth Week of August

PLEASE COMPLETE THE INFORMATION BELOW

STUDENT'S EMAIL: _____

FAX NUMBER () _____

ATTN: _____

EMBASSY ADVISOR EMAIL: _____

**IF YOUR REQUEST IS RECEIVED AFTER THE TIMFRAME ABOVE, PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR PROCESSING AFTER SUBMITTING REQUEST.
PROPER IDENTIFICATION IS REQUIRED FOR THIS REQUEST.**