## University of Belize

## UNIVERSITY OF BELIZE

## APPLICATION FOR INFORMATION FROM REGISTRAR'S OFFICE

Signature:			
Accounts Officer			
Date Paid:			
Amount Paid:			
Receipt No.		meant's Signature)	
ACCOUNTS OFFICE INFORMATION	(Apr	Date:	
Applicant's Signature:		Date:	
	BELCAST		
☐ University College of Belize	☐ Belize Teachers'	College	
University of Belize	☐ Bliss School of N	ursing Belize Technical College	
8. Institution attended or curre	ently attending:		
7. Program Incomplete/Discont	tinue: YES  NC		
6. Date started Program:	nm: Date Completed:		
5. <b>Program</b> :			
4. Student ID #:			
		or e-mail:	
(Last Name)	,		
2. Name (as it appears on perm	(First Name)	(Middle Name)	
1. Number of copies:			
Amalgamation Letter	_		
Last Semester of Attendance Letter	-		
Embassy Letter (State which Embassy	y) —		
☐ Completion Letter ☐ City &	Guilds Certified Note		
☐ In-school Letter ☐ Accep	stance Letter	(Note: Charges apply in accordance to destination)	
☐ Transcript ☐ Langu	age of Instruction Letter	For mailing, include mailing address here:	

We are not responsible for any documents that are not retrieved within one academic semester.