

# SCHOOL STUDENT LETTER

**TO:** NECA-IBEW Welfare Trust Fund

**FROM:** \_\_\_\_\_  
(Name of the School/College/University/Tech School)

\_\_\_\_\_  
(Address of School)

\_\_\_\_\_  
(City & State) (Phone number)

**STUDENT:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**MEMBER:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**CLAIM (s) #:** \_\_\_\_\_

**This is to verify that the above student is/was registered at this school as a student during:**

<b>ACADEMIC TERM</b>	<b>STATUS</b>	<b>ACADEMIC TERM</b>	<b>STATUS</b>
_____		_____	
_____		_____	
_____		_____	
_____		_____	

\_\_\_\_\_  
**Signature/Seal-Office of Registrar**

**EXPLANATION OF STATUS:**

- (FT)** Full-time
- (HT)** Half-time
- (PT)** Part-time
- (LHT)** Less than half-time

**Fax#: 217.875.2581**

11.10.05